

## **Certification as a Common Carrier - Application Form A**

Complete this application to the best of your knowledge. Any inaccuracies or deficiencies will be promptly corrected or the application may be returned. The applicant must sign and date the application before mailing an original and three copies to: Jaelyn A. Brillong, Secretary to the Commission, Three Empire State Plaza, Albany, NY 12223-1350. If this application is granted, the company must comply with all applicable rules and regulations of the Public Service Commission.

1. Identification of applicant and principal business office:

**Local Access LLC  
11442 Lake Butler Boulevard  
Windermere, FL 34786  
Telephone: (866) 841-7898  
Facsimile: (240) 358-6510**

■ President and Telephone/Fax

**Robert Russell  
President  
11442 Lake Butler Boulevard  
Windermere, FL 34786  
Telephone: (866) 841-7898  
Facsimile: (240) 358-6510**

■ Other Officers and Telephone/Fax

**Neil Rosenblit, CEO  
Jim Finneran, COO/CO  
Jim Hudson, CTO  
Patrick Ferguson, CIO**

**All of these officers maintain offices at the Company's headquarters.**

2. Provide the following Telecommunications Carrier Critical Information Form.

**Please see *Exhibit A*.**

3. Provide a copy of the company's certificate of incorporation and, if not incorporated in New York State, a copy of the authority to transact business in New York State (foreign business authority). If not incorporated, attach a list of the names, addresses, and telephone numbers of the company's owners.

**Please see *Exhibit B*.**

4. Include a general description of the services to be offered and how it would enhance competition in the area to be served.

**The Applicant seeks authority to operate as a local exchange and interexchange carrier on both a resold and facilities-basis throughout the State of New York. Applicant intends to initially serve business and carrier customers, and provide both voice and access services. As business and economic circumstances dictate, Company intends to provide additional local exchange, exchange access and dedicated transport services.**

**Applicant seeks a Certificate of Public Convenience and Necessity to operate as a facilities-based and resold local exchange common carrier. Applicant also seeks a Certificate of Public Convenience and Necessity to operate as a provider of resold and facilities-based interexchange telecommunications throughout the State of New York.**

**A decision by the Commission to grant Applicant a Certificate of Public Convenience and Necessity to provide competitive telecommunications services to other carriers and business customers in the State of New York will enhance competition in the state. Specifically, Company's participation in the market for local exchange and interexchange telecommunications services in the State of New York will promote consumer choice by expanding the availability of innovative, quality, reliable and competitively-priced telecommunications services to underserved markets. Approval of this Application also is likely to compel other local telecommunications providers to improve their existing services, increase the quality and efficiency of their operations, and introduce innovative new services of their own. Moreover, the addition of Company to the New York telecommunications market makes it probably that consumers of telecommunications services in New York will receive the optimal benefits associated with downward pressure on prices, improved consumer responsiveness, and access to increasingly advanced telecommunications technology.**

5. Include a description of the plant and system to be constructed and the anticipated construction schedule.

**The Company plans to initially develop its network through a combination of its own facilities and leased facilities from other certified carriers.**

6. Include a statement as to whether the company has ever acquired a customer by switching it from another company without the customer's authorization. If the company has ever acquired a customer by switching it from another company without the customer's authorization, please provide an explanation.

**Applicant has never acquired a customer by switching it from another company without that customer's authorization.**

7. Include a statement as to whether the company was ever the subject of a complaint and/or investigation for unauthorized switching of a customer's local or long distance service from one carrier to another. If the company was ever the subject of a complaint and/or investigation for unauthorized switching of a customer's local or long distance service from one carrier to another, please provide an explanation.

**Applicant has not been the subject of a complaint and/or investigation for unauthorized switching of a customer's local or long distance service from one carrier to another.**

8. Provide your company's Federal Social Security Account Number and/or Federal Employer Identification Number.

**45-5492924**

9. If applying for authorization to provide local exchange service (residential and/or business dialtone), describe how your company will provide access to public safety/emergency telephone services, access to the statewide relay system and lifeline service. In addition, the applicant must comply with the requirements enumerated on pages 30-31 of the Commission's Order in Case 94-C-0095, issued May 22, 1996. The Commission will entertain waivers of any of these specific requirements only on a case-by-case basis. Please describe briefly how you plan to comply with these requirements. If you do not plan to provide local exchange services, please state so.

**Initially, the Company plans to act as a wholesaler to other carriers that may offer these services to end users. The Company may provide voice-grade dialtone service to end users as well. When the Company begins to directly provide services to end users, the Company will provide all of its customers with access to public safety/emergency telephone services (911, E-911, 0-) and the statewide relay system through arrangements with other carriers and will provide or otherwise support Lifeline services to its qualified residential customers.**

**Additionally, the Company will comply with the requirements enumerated on pages 30-31 of the Commission's Order in Case 94-C-0095, issued May 22, 1996. Specifically, Company will offer its local exchange services pursuant to its tariffs and, on a non-discriminatory basis, provide service to any requesting customer with the Company's defined service territory. Furthermore, Company will comply with the Telephone Fair Practice rules, the Common Carrier rules, the Commission's Statement of Policy on Privacy in Telecommunications, the Commission's Open Network Architecture**

**principles, the Commission's service quality standards and the Commission's infrastructure monitoring requirements, by making these policies and statements widely known to all relevant employees of the Company. Company also will provide reasonable interconnection for the joint provision of service to any certificated carrier requesting such interconnection.**

10. If applying for authorization to provide local exchange service (residential and/or business dialtone), indicate whether your company will have "0-" emergency calls processed by the ILEC or other "0-" certified operator services provider, or intends to file a subsequent petition for "0-" certification of its own.

**Company plans to offer service directly to end users, and the Company will have "0-" emergency calls routed to the ILEC at its E911 access tandem and further processed by the Public Safety Answering Point ("PSAP").**

11. If applying for authorization to provide local exchange service (residential and/or business dialtone), include an intraLATA presubscription implementation plan.

**Company plans to offer voice grade dialtone service directly to end users. Company has attached its intraLATA presubscription implementation plan as *Exhibit C*.**

12. If applying for authorization to provide facilities based local exchange services (residential and/or business dialtone), your company is expected to comply with the Commission's Network Reliability Orders. On July 28, 2004, the Commission issued an order, in Case 03-C-0922 - Proceeding on Motion of the Commission to Examine Telephone Network Reliability, addressing such items as Telecommunications Service Priority (TSP) rates and procedures, dual cable entrance facilities and a show cause requirement concerning route diversity and a new service, Critical Facilities Administration Service. A second order, re-addressing Telephone Network Reliability, was issued on June 15, 2005. In your application, please describe how your company will undertake to comply with these Commission pronouncements. If you do not plan to provide facilities based local exchange services, please state so.

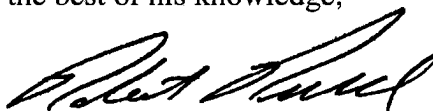
**Applicant intends to offer facilities-based local exchange services. Applicant endeavors to ensure that its network is redundant in order that Applicant can continue to offer services in the event of a disaster or other catastrophic failure. Applicant intends to comply with all directives issued by the Commission.**

**VERIFICATION**

I, Robert Russell, am the Chief Executive Officer of Local Access LLC (“Local Access”), Affiant, being duly sworn and affirmed according to law, deposes and says that:

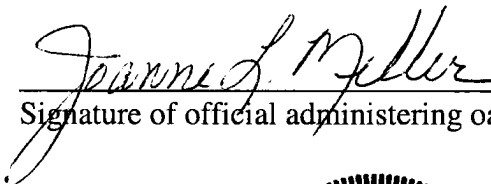
That he is authorized to and does make this affidavit for Local Access;

That the facts above set forth are true and correct to the best of his knowledge, information, and belief.



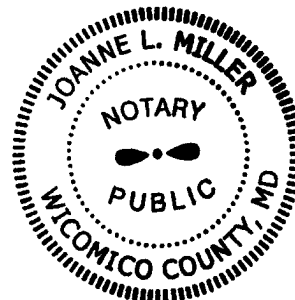
Robert Russell  
President

Sworn and subscribed before me this 10 day of July, 2012.



Signature of official administering oath

My commission expires My Commission Expires  
September 23, 2015



# **Exhibit A**

## **Telecommunications Company Critical Information Form**

NEW YORK STATE PUBLIC SERVICE COMMISSION  
**TELECOMMUNICATIONS COMPANY CRITICAL INFORMATION FORM (TCCI)**

**What is the TCCI form?**

The TCCI form is used to update basic company information in the Department's Telecommunications Company Critical Information Database that is maintained by the Office of Telecommunications. Company information is utilized in a number of Department applications and may be used in emergency situations to quickly correspond with companies.

**Who Should File this Form?**

- All telecommunications providers including all cable television companies regulated by the New York Public Service Commission are required to complete a TCCI form.
- A company that is applying for certification as a telecommunications carrier in New York State.

**When should a company Update the Form?**

- A company that has changed its name and filed an Adoption Supplement with the New York Public Service Commission.
- A company that has changes to a previously filed TCCI.
- A company seeking Commission approval for a merger and/or acquisition.  
Note: All companies involved in the merger should complete a new or revised TCCI Form if they will continue to do business in New York. If a company will no longer be doing business in New York they should withdraw their TCCI form by contacting Judy Sylvester (518) 473-8074.
- All regulated companies are required to update the form and Stray Voltage Attestation annually September 1 of every year

**Instructions:**

If you are filing this form electronically, please complete and press the **Submit** button. Do not mail additional copies of the form.

\*Please be advised: We recommend using Microsoft Internet Explorer 5 or greater. Users who are not using Microsoft Internet Explorer 5.0 may find that some or all of the features on this page will not function properly.

If you are filing this form via regular mail, complete the form and mail the TCCI form to the address below. Do not include this page of Instructions with the form.

All new telephone companies seeking certification must file a copy of their Application for Certification and tariff.

**Mailing address:**

**Jaclyn A. Brillling, Secretary**  
**New York State Department of Public Service**  
**Three Empire State Plaza**  
**Albany, NY 12223-1350**

If you have any questions regarding the completion of this form, contact Judy Sylvester (518) 473-8074.

**Please Note: If there are subsequent changes to your company's information, submit a revised TCCI form immediately.**

Please check *only one* of the seven following boxes below and follow any applicable instructions for the box chosen.

**This company is certified by the New York Public Service Commission and is submitting a NEW TCCI form because:**

- This company is seeking certification in New York State  
Mail the application for certification and tariff to the mailing address above.
  
- This company is certified by the New York Public Service Commission but has not submitted a TCCI form.  
Please Note: This company will be listed on our website as Inactive with the Department until a properly completed TCCI form is received.
  
- This company has filed an Adoption Supplement changing its name.  
Please indicate the former company name under "Formerly Known As" below.
  
- This company has recently been certified by the New York Public Service Commission as a result of a merger or acquisition approved by the Commission and a transfer of a Certificate of Public Convenience and Necessity.  
Name of the company(ies) that has ceased operations
  
- Annual Update and Stray Voltage Attestation

**This company is certified by the New York Public Service Commission and is submitting a REVISED TCCI form because:**

- Updating with new company information.
  
- Updating company information as a result of a merger/acquisition that

has been approved by the Commission.

**ALL OF THE FOLLOWING FIELDS MUST BE FILLED OUT OR THIS FORM WILL BE CONSIDERED INCOMPLETE.  
IF A FIELD IS NOT APPLICABLE, INDICATE "NA".**

**Company's Corporate Name:** Local Access LLC

**Doing Business As, if applicable:** N/A

**Formerly Known As, if applicable:** N/A

**If Providing Cable Service:**

**Region where providing service:**

**System:**

**State in which Certificate of Incorporation filed:** Florida

**Company Website:** www.localaccessllc.com

**Company Corporate Address:** 11442 Lake Butler Boulevard

**Line 2 (P.O. Box)**

**Line 3 (Floor, Etc)**

City	State:	Zip:
Windermere	FL	34786

Attention: \_\_\_\_\_

Copy  
Address  
Information  
all fields on  
Form

**Regulatory Contact:** **First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
Jim \_\_\_\_\_ Finneran \_\_\_\_\_

**Title:** COO/CO \_\_\_\_\_

**Telephone Number:** (866) 841-7898 x6403 \_\_\_\_\_

**Fax Number:** (240) 358-6510 \_\_\_\_\_

**E-mail address:** Jfinneran@localaccessholdings.com \_\_\_\_\_

**Mailing address:** 11442 Lake Butler Boulevard \_\_\_\_\_

Line 2  
(P.O. Box) \_\_\_\_\_

Line 3  
(Floor, Etc) \_\_\_\_\_

**City** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
Windermere \_\_\_\_\_ FL \_\_\_\_\_ 34786 \_\_\_\_\_

Copy  
Regulatory  
Contact  
Information  
to all fields  
on Form

**Company President:** **First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
Robert \_\_\_\_\_ Russell \_\_\_\_\_

**Telephone Number:** 866-841-7898 \_\_\_\_\_

**Fax Number:** 240-358-6510 \_\_\_\_\_

**E-mail address:** Brussell@localaccessholdings.com \_\_\_\_\_

**Mailing address:** 11442 Lake Butler Boulevard

Line 2  
(P.O. Box)

Line 3  
(Floor,  
Etc)

City	State:	Zip:
Windermere	FL	34786

Attention:

**Regulatory Consumer Complaint Contact:**

**First Name:**

**Last Name:**

Jim

Finneran

**Telephone Number:** (866) 841-7898 x6403

**Fax Number:** 240-358-6510

**E-mail address:** Jfinneran@localaccessholdings.com

**Mailing address:** 11442 Lake Butler Boulevard

Line 2  
(P.O. Box)

Line 3  
(Floor, Etc)

City	State:	Zip:
Windermere	FL	34786

Attention:

**Customer Contact Telephone Number:** (866) 841-7898

**Business Office Contact, Representative or Agent (for billing/assessment)**

**First Name:**

**Last Name:**

Jim

Finneran

purposes):

<b>Telephone Number:</b>	(866) 841-7898 x6403	
<b>Fax Number:</b>	240-358-6510	
<b>E-mail address:</b>	Jfinneran@localaccessholdings.com	
<b>Mailing address:</b>	11442 Lake Butler Boulevard	
Line 2 (P.O. Box)		
Line 3 (Floor, Etc)		
	<b>City</b>	<b>State:</b>
	Windermere	FL
		<b>Zip:</b>
		34786
<b>Attention:</b>		

By Order issued July 3, 2006 in Case 04-M-0159, the Commission directed all facilities-based telecommunications providers to adhere to appropriate electrical safety codes and attest on an annual basis that they comply with the National Electrical Safety Code and National Electrical Code. Accordingly, by checking the 'yes' box below, I attest that our company's installation, operation, and maintenance practices

## **Exhibit B**

### **Qualification to Do Business**

# *State of Florida*

## *Department of State*

I certify from the records of this office that LOCAL ACCESS LLC is a limited liability company organized under the laws of the State of Florida, filed on October 14, 2010, effective October 13, 2010.

The document number of this limited liability company is L10000107257.

I further certify that said limited liability company has paid all fees due this office through December 31, 2012, that its most recent annual report was filed on February 7, 2012, and its status is active.

I further certify that said limited liability company has not filed Articles of Dissolution.

*Given under my hand and the Great Seal of  
Florida, at Tallahassee, the Capital, this the  
Fifteenth day of June, 2012*

*Ken DeJager*

*Secretary of State*



Authentication ID: 500236441515-061512-L10000107257

To authenticate this certificate, visit the following site, enter this ID, and then follow the instructions displayed.

<https://efile.sunbiz.org/certauthver.html>

# ***STATE OF NEW YORK***

## ***DEPARTMENT OF STATE***

I hereby certify that the annexed copy has been compared with the original document in the custody of the Secretary of State and that the same is a true copy of said original.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on August 22, 2012.

A handwritten signature in black ink, appearing to read "Daniel E. Shapiro".

Daniel E. Shapiro  
First Deputy Secretary of State

120821000 549

APPLICATION FOR AUTHORITY OF

Local Access LLC

(Insert name of Foreign Limited Liability Company)

Under Section 802 of the Limited Liability Company Law

Filed by: Robert Russell (Name)

11442 Lake Butler Blvd (Mailing address)

Windsormere FL 34786 (City, State and Zip code)

NOTE: This form was prepared by the New York State Department of State for filing an application for authority for a foreign limited liability company to conduct business in New York State. It does not contain all optional provisions under the law. You are not required to use this form. You may draft your own form or use forms available at legal supply stores. The Department of State recommends that legal documents be prepared under the guidance of an attorney. The certificate must be submitted with a \$250 filing fee made payable to the Department of State.

(For office use only)

FILED

2012 AUG 21 AM 11:14

ICC STATE OF NEW YORK DEPARTMENT OF STATE

FILED AUG 21 2012

TAXES

JCH

RECEIVED

2012 AUG 21 AM 10:17

JCH

579

(B)

# **Exhibit C**

## **IntraLATA Toll Presubscription Plan**

## INTRALATA PRESUBSCRIPTION PLAN

### IntraLATA Presubscription

#### A) General

InterLATA Presubscription is a procedure whereby a subscriber designates to the Company the carrier which the subscriber wishes to be the carrier of choice for intraLATA toll calls. Such calls are automatically directed to the designated carrier, without the need to use carrier access codes or additional dialing to direct the call to the designated carrier. IntraLATA presubscription does not prevent a subscriber who has presubscribed to an intraLATA toll carrier from using carrier access codes or additional dialing to direct calls to an alternative intraLATA toll carrier on a per call basis. IntraLATA Presubscription will become effective upon the initial offering of certified local exchange service.

#### B) IntraLATA Presubscription Options

1. Option A: The Customer may select the Company as the presubscribed carrier for intraLATA toll calls subject to presubscription.
2. Option B: The Customer may select her/his interLATA toll carrier for IntraLATA toll calls subject to presubscription.
3. Option C: The Customer may select a carrier other than the Company or the Customer's interLATA toll carrier as the presubscribed carrier for intraLATA toll calls subject to presubscription.
4. Option D: The Customer may select no presubscribed carrier for intraLATA toll calls subject to presubscription which will require the subscriber to dial a carrier access code to route all intraLATA toll calls to the carrier of choice for each call.

#### C) Rules and Regulations

1. The Customer will retain their current dialing arrangements until they request that their dialing arrangements be changed.
2. The Customer of record or new Customers may select either Options A, B, C, or D for intraLATA Presubscription.
3. The Customer may change their selected Option and/or their presubscribed intraLATA toll carrier at any time subject to charges specified in this tariff.

## IntraLATA Presubscription (cont'd)

### D) IntraLATA Presubscription Procedures

1. New Customers will be asked to select an intraLATA toll carrier(s) at the time the Customer places an order to establish local exchange service with the Company. The Company will process the Customer's order for intraLATA service. The selected carrier(s) will confirm their respective subscribers' verbal selection by third-party verification or return written confirmation notices. A new Customer's initial request for intraLATA toll service presubscription shall be provided free of charge.
2. If a new Customer is unable to make a selection at the time the new Customer places an order to establish local exchange service, the Company will read a random listing of all available intraLATA carriers to aid the Customer in selection. If selection is still not possible, the Company will inform the Customer that he/she will be given 90 calendar days in which to inform the Company of an intraLATA toll carrier presubscription selection free of charge. Until the Customer informs the Company of his/her choice for intraLATA Toll carrier, the Customer will not have a presubscribed intraLATA toll carrier, but rather will be required to dial a carrier access code to route all intraLATA toll calls to the carrier(s) of choice. The Customer who informs the company of a choice for intraLATA toll presubscription within the 90-day period will not be assessed a service charge for the initial subscriber request.
3. Customers of record may initiate an intraLATA presubscription change at any time subject to the charges specified below. If a Customer of record inquires of the Company of the carriers available for intraLATA toll presubscription, the Company will read a random listing of all available intraLATA carriers to aid the Customer in selection.

### E) IntraLATA Presubscription Charges

#### 1. Application of Charges

After a Customer's initial selection for a presubscribed intraLATA toll carrier and as detailed above, for any change thereafter, an IntraLATA Presubscription Change Charge, as set forth will apply.

### B) Nonrecurring Charges

#### (1) IntraLATA Presubscription Change Charge: Residence and Business

Per business or residence line, trunk or port

--	Initial line, or trunk, or port	\$0.01 - \$10.00
--	Additional line, trunk, or port	\$0.01 - \$10.00