

APPLICATION CERTIFICATE OF CONVENIENCE & NECESSITY

If the Applicant wants to provide any type of telecommunications services in Arizona (excluding Customer Owned Pay Telephone (COPT)), please use this application form to provide the Arizona Corporation Commission (“Commission”) with the information as requested.

Remember that any information submitted to Docket Control for a Certificate of Convenience and Necessity (“CC&N”) will be made part of the public record (including financial statements). However, any information designated as confidential will not be accepted by Docket Control. You may electronically file your application using the ACC Portal (efiling.azcc.gov) or mail your original CC&N application plus one (1) copy to the Arizona Corporation Commission, Docket Control, 1200 W. Washington Street, Phoenix, AZ 85007-2927.

Make sure to use the Application form dated 9/29/25. Also, make sure to answer each numbered item and part of that item in each section of the Application form that corresponds to the type of telecommunications service(s) for which the company is applying. If you do not use the correct Application form and/or do not completely answer the numbered item(s) and/or do not provide the requested information, Staff may find the Application insufficient and will request the Applicant to provide the missing information in order for the Application to be considered valid for consideration.

Requirements Regarding Representation: Unless the Applicant is a sole proprietor representing himself or herself as an individual, the representative for an Applicant with regard to the Application must meet the requirements of the Arizona Rules of the Supreme Court (“ARSC”) regarding the practice of law. With a few exceptions, ARSC Rule 31.2 prohibits a person who is not authorized to practice law in Arizona from engaging in the practice of law in Arizona. “Practice of law” is broadly defined in ARSC Rule 31(b). In the context of a Commission case, it would include representing an Applicant in a hearing or other Commission proceeding, preparing a document on behalf of an Applicant for filing with the Commission, and negotiating (such as with Commission Staff) on behalf of an Applicant.

As an exception to the preceding paragraph, under ARSC Rules 31.3(c)(5) and (6), a person who is not an Arizona attorney is allowed to perform the above tasks for an Applicant company in a Commission case if the person meets all of the following:

- The person is an officer, partner, member, manager, or employee of the Applicant company;
- The Applicant company has specifically authorized the person to represent it in the particular proceeding;
- Representing the Applicant company in Commission cases is not the person’s primary duty to the Applicant company, but is secondary or incidental to other duties relating to the Applicant company’s management or operation; and
- The person is not receiving separate or additional compensation for representing the Applicant company (other than receiving reimbursement for costs).

As another exception, ARSC Rule 31.3(c)(6) allows several types of public utility technical

experts to prepare, submit, or file with the Commission on a company's behalf a tariff, rate schedule, engineering report, or other technical or financial document within the person's field of expertise. This exception does not include Applications for a CC&N.

To view the language of the rules, including all of the exceptions available, please see the Rules of the Supreme Court of Arizona, available through www.azcourts.gov/rules.

In order for Staff to review the Application, please complete and submit the following form.

ARIZONA CORPORATION COMMISSION

**Application and Petition for Certificate of Convenience and Necessity to Provide
Intrastate Telecommunications Services**

eFile the application using ACC Portal (efiling.azcc.gov) OR

Mail original plus 1 copy of completed application to:

For Docket Control Only:
(Please Stamp Here)

Docket Control Center
Arizona Corporation Commission
1200 West Washington Street
Phoenix, Arizona 85007-2927

Please indicate below if the Applicant has any other applications pending before the Commission in Arizona.

Type of Service: _____

Docket No.: _____ Date: _____ Date Docketed: _____

Type of Service: _____

Docket No.: _____ Date: _____ Date Docketed: _____

A. COMPANY AND TELECOMMUNICATION SERVICE INFORMATION

(A-1) Please indicate the type of telecommunications services that the company proposes to provide in Arizona and mark the appropriate box(s).

- ☐ Resold Long Distance Telecommunications Services (Answer Sections A, B, D).
- ☐ Resold Local Exchange Telecommunications Services (Answer Sections A, B, C, D).
- ☐ Facilities-Based Long Distance Telecommunications Services (Answer Sections A, B, D).
- ☐ Facilities-Based Local Exchange Telecommunications Services (Answer Sections A, B, C, D, E)
- ☐ Alternative Operator Services Telecommunications Services (Answer Sections A, B)
- ☐ Private Line (Answer Sections A, B, C, D, E)
- ☐ Wholesale Services to Telecommunications Carriers (Answer Sections A, B, C, D, E)
- ☐ Other _____ (Please attach a detailed description labeled A-1)

(A-2) The company name, business address, telephone number (including area code), facsimile number (including area code), email address, and URL of the Applicant:

(A-3) Please list all d/b/a ("Doing Business As") names under which the Applicant is doing business in states other than Arizona. Please also indicate if the company will be using a d/b/a in Arizona and specify what that d/b/a will be.

(A-4) The name, address, telephone number (including area code), facsimile number (including area code), and email address of the Applicant's Management Contact:

(A-5) Unless the Applicant is a Sole Proprietor representing himself or herself as an individual, the name, address, telephone number (including area code), facsimile number (including area code), and email address of the Applicant's Arizona Attorney or Authorized Representative under ARSC Rule 31.3(c)(5) and (6) for this Application:

Specify one of the following:

- ☐ The Representative is an active member of the State Bar of Arizona: Bar Number: _____
- ☐ The Representative meets the requirements of ARSC Rule 31.3(c)(5) and (6) and is specifically authorized to represent the Applicant before the Commission regarding this Application.

See the Cover Sheet for additional information.

(A-6) The name, address, telephone number (including area code), facsimile number (including area code), and email address of the Applicant's Complaint Contact Person, as well as the toll-free number customers can use to contact the company for complaints/customer service:

If the Applicant has a Network Operations Center (NOC), please specify the location by address, the hours of operation, contact number, contact email address, and the number of employees.

If the Applicant has a Customer Service Center, please specify the location by address, the hours of operation, contact number, contact email address, and the number of employees.

(A-7) ☐ What type of legal entity is the Applicant? Mark the appropriate box(s) and category.

☐ Sole proprietorship

☐ Partnership: _____ Limited, _____ General, _____ Arizona, _____ Foreign

☐ Limited Liability Company: _____ Arizona, _____ Foreign

☐ Corporation: _____ "S", _____ "C", _____ Non-profit

☐ Other, specify: _____

If the Applicant is registered as an entity in another state, please identify the entity name and the state(s) here: _____

(A-8) Please include "Attachment A-8":

Attachment "A-8" **must** include the following information:

1. A current copy of the Applicant's Certificate of Good Standing as a domestic or foreign corporation, LLC, or other entity in Arizona.
2. A list of the names of **all** owners, partners, limited liability company managers (or if a member managed LLC, all members), and corporation officers and directors (specify).
3. Indicate percentages of ownership of each person listed in A-8.2.

(A-9) Include a proposed Arizona services tariff as "Attachment A-9".

The proposed tariff **must** include the following information:

1. Proposed minimum, current, and maximum rates and charges for each service offered (reference by tariff page number).
2. Complete Terms and Conditions Applicable to the provision of Service(s).
3. Deposits, Advances, and/or Prepayments applicable to the provision of Service (reference by tariff page number).
4. The proposed fee that will be charged for returned checks (reference by tariff page number).

(A-10) Indicate the geographic market to be served:

☐

Statewide. (Applicant adopts the statewide map of Arizona provided with this application).

☐

Other. Describe and provide a detailed map depicting the proposed service area.

(A-11) Indicate if the Applicant or any of its officers, directors, partners, or managers has been or are currently involved in any formal or informal complaint proceedings before any state or federal regulatory commission, administrative agency, or law enforcement agency.

Describe in detail any such involvement in an Attachment labeled as A-11. Please make sure you provide the following information:

1. States in which the Applicant has been or is involved in proceedings.
2. Detailed explanations of the substance of the complaints.
3. If the complaint was resolved, how it was resolved (provide supporting documentation if available).
4. Actions taken by the Applicant to remedy and/or prevent the complaint(s) from re-occurring.

(A-12) Indicate if the Applicant or any of its officers, directors, partners, or managers has been or are currently involved in any civil or criminal investigation, or had judgments entered in any civil matter, judgments levied by any administrative or regulatory agency, or been convicted of any criminal acts within the last ten (10) years.

Describe in detail any such judgments or convictions in an Attachment labeled as A-12. Please make sure you provide the following information:

1. States involved in the judgments and/or convictions.
2. Reasons for the investigation and/or judgment.
3. Copy of the Court order, if applicable.

(A-13) Indicate if the Applicant's customers will be able to access alternative toll service providers or resellers via 1+101XXXX access.

☐ Yes

☐ No

(A-14) Submit as Attachment A-14 a copy of the Affidavit of Publication that the Applicant has, as required, published legal notice of the Application in all Arizona counties where the Applicant is requesting authority to provide service. Please include a copy of the published notice.

Note: For Resold applications, the Applicant must complete and submit an Affidavit of Publication Form before Staff prepares and issues its report. Refer to the Commission's website at <http://www.azcc.gov/divisions/utilities/telecom/forms.asp> for the Sample Legal Notice.

For Facilities-Based applications, the Hearing Division will advise the Applicant of the date of the hearing and the publication of legal notice. Do not publish legal notice or file affidavits of publication until you are advised to do so by the Procedural Order issued by the Hearing Division.

(A-15) If the application is to provide resold services, please provide the name of the company or companies whose telecommunications services the Applicant will resell.

(A-16) List the States as Attachment A-16 in which the Applicant has had an application approved or denied to offer telecommunications services. Please also indicate the type of telecommunications service(s) for each state.

(A-17) List the States as Attachment A-17 in which the Applicant has been authorized to provide telecommunications services. Include the date on which authorization was granted. Indicate in which of those states the Applicant is actively providing telecommunications service(s) to customers.

(A-18) List the names and addresses of any alternative providers of telecommunications services that are also affiliates of the Applicant, as defined in A.A.C. R14-2-801.

(A-19) Indicate if the Applicant is seeking to have its services classified as competitive: ☐ Yes ☐ No
B. FINANCIAL INFORMATION
(B-1) Indicate if the Applicant has financial statements for the three (3) most recent years. ☐ Yes ☐ No If "No," explain why and give the date on which the Applicant began operations. Date: _____
(B-2) Include in "Attachment B-2". Provide the Applicant's financial information for the two (2) most recent years. 1. A copy of the Applicant's balance sheet. 2. A copy of the Applicant's income statement. 3. A copy of the Applicant's audit report. 4. A copy of the Applicant's retained earnings balance. 5. A copy of all related notes to the financial statements and information. <u>Note:</u> Make sure "most recent years" includes current calendar year or current year reporting period. Indicate here if the Applicant would like to request a standard Protective Order be prepared so that the Applicant may submit its financial information confidentially. Please also specify the reason(s) for requesting confidentiality.
(B-3) Indicate if the Applicant will rely on the financial resources of its Parent Company, if applicable. ☐ Yes ☐ No If YES, please describe why:
(B-4) The Applicant must provide the following information. 1. Provide the projected total revenue expected to be generated by the provision of telecommunications services to Arizona customers for the first twelve months following certification, adjusted to reflect the maximum rates for which the Applicant requested approval. Adjusted revenues may be calculated as the number of units sold times the maximum charge per unit. 2. Provide the operating expenses expected to be incurred during the first twelve months of providing telecommunications services to Arizona customers following certification. 3. Provide the net book value (original cost less accumulated depreciation) of all Arizona jurisdictional assets expected to be used in the provision of telecommunications service to Arizona customers at the end of the first twelve months of operation. Assets are not limited to plant and equipment. Items such as office equipment and office supplies should be included in this list. 4. If the projected value of all assets is zero, please specifically state this in your response.

5. If the projected fair value of the assets is different than the projected net book value, also provide the corresponding projected fair value amounts.

Note: Please be aware that total assets, total equity, net income or net loss, and net book value figures are always made public in a CC&N case and will appear in the Staff Report, Recommended Order, and Final Order.

Please acknowledge the Applicant's understanding of the above statement.

☐ Yes

☐ No

C. RESOLD AND/OR FACILITIES-BASED LOCAL EXCHANGE TELECOMMUNICATIONS SERVICES

- (C-1) Indicate if the Applicant has any Interconnection Agreements currently in place

☐ Yes

☐ No

If "Yes", please reference the Interconnection Agreement by Commission Docket Number or Commission Decision Number.

D. FACILITIES-BASED LONG DISTANCE AND/OR FACILITIES BASED LOCAL EXCHANGE TELECOMMUNICATIONS SERVICES

- (D-1) If the Applicant is requesting a geographic expansion of their current Arizona CC&N, please list below the type of service(s) already being provided and the Decision number(s) issued by the Commission granting such authorization(s):

E. FACILITIES-BASED LOCAL EXCHANGE TELECOMMUNICATIONS SERVICES

- (E-1) Indicate whether the Applicant will abide by the quality of service standards that were approved by the Commission in Commission Decision Number 59421:

☐ Yes

☐ No

- (E-2) Indicate whether the Applicant will provide all customers with 911 and E911 service, where available, and will coordinate with incumbent local exchange carriers ("ILECs") and emergency service providers to provide this service:

☐ Yes

☐ No

- (E-3) Indicate that the Applicant's switch is "fully equal access capable" (i.e., would provide equal access to facilities-based long distance companies) pursuant to A.A.C. R14-2-1111 (A):

☐ Yes

☐ No

I certify that if the applicant is an Arizona corporation, a current copy of the Articles of Incorporation is on file with the Arizona Corporation Commission and the applicant holds a Certificate of Good Standing from the Commission. If the company is a foreign corporation or partnership, I certify that the company has authority to transact business in Arizona. I certify that all appropriate city, county, and/or State agency approvals have been obtained. Upon signing of this application, I attest that I have read the Commission's rules and regulations relating to the regulations of telecommunications services (A.A.C. Title 14, Chapter 2, Article 11) and that the company will abide by Arizona state law including the Arizona Corporation Commission Rules. I agree that the Commission's rules apply in the event there is a conflict between those rules and the company's tariff, unless otherwise ordered by the Commission. I certify that to the best of my knowledge the information provided in this Application and Petition is true and correct. I certify that I am a Sole Proprietor representing myself as an individual, or that I am legally authorized to represent the Applicant as an active member of the State Bar of Arizona, or that I am legally authorized to represent the Applicant under ARSC Rule 31.3(c)(5) and (6), as designated above.

(Signature of Authorized Representative)

(Date)

(Print Name of Authorized Representative)

(Title)

SUBSCRIBED AND SWORN to before me this _____ day of _____, _____

NOTARY PUBLIC

My Commission Expires _____