

210 N. Park Ave. Winter Park, FL 32789 Renee' Jenkins, Secretary of Commission Public Utility Commission of Ohio

180 East Broad Street

Columbus, OH 43226-0573

P.O. Drawer 200 Winter Park, FL 32790-0200

Re: NYNEX Long Distance Company d/b/a Verizon Enterprise Solutions
Tariff Docket No. 90-5721-CT-TRF Case No. 96-

Tariff Docket No. 90-5721-CT-TRF Case No. 96-

Dear Sir/Madam:

Tel: 407-740-8575 Fax: 407-740-0613 tmi@tminc.com Pursuant to my conversation with Melissa Scarberry on your staff, enclosed for filing are the original and ten (10) copies of a tariff revision on behalf of NYNEX Long Distance Company d/b/a Verizon Enterprise Solutions. This filing is dated to become effective on January 27, 2007.

Pages included in this filing are as follows:

563 Registration Form

52nd Revised Page 2

Updates Check Sheet

First Revised Page 34.2.2

Revises Business Unlimited Long Distance Service Bundled

Service Option Limitations of Service language

This filing makes staff requested changes to the Business Unlimited Long Distance Service Bundled Service Option Limitations of Service language.

Questions regarding this filing may be directed to my attention at (407) 740-8575 or via e-mail at cwightman@tminc.com.

Please acknowledge receipt of this filing by date stamping the extra copy of this cover letter and returning it to me in the self-addressed, stamped envelope provided for that purpose.

Thank you for your assistance.

Connie Wightman Consultant

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Sincerel

cc:

Cheryl Powers

Mitzi Bishop - Verizon 600 Hidden Ridge MC HQE02F59 Irving, TX 75038

File: NLD-OH TMS: OHo0701

NLD: N06-63

This is to certify that the images appearing are an accurate and complete reproduction of a case file document delivered in the regular course of business.

Technician Date Processed 1-26-0



# The Public Utilities Commission of Ohio TELECOMMUNICATIONS APPLICATION FORM

|                                                                                                                                                                         | TELEC                                                                                                                                                                                                                                                                                                                                                                        | ne Public Utilities Commis<br>OMMUNICATIONS APPI<br>(Effective: 10/01/200<br>rsuant to Case Nos. 99-998-TP-COI ac                                                                                                                                                                                                                                                                                                                                                                                          | LICATION FOR                                                                                                                                                                                      | <b>M</b>                                                                                                            | TOP JAN 2 COCKE                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|---------------------------------|
| d/b/a Verizon Ente                                                                                                                                                      | pplication of NYNEX Long rprise Solutions  l Telecommunications Service                                                                                                                                                                                                                                                                                                      | 0'<br>) Case No. (                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 7<br>%-85 - tp - zt                                                                                                                                                                               | ' <b>A</b>                                                                                                          | All JAN 26 AMILES OF AMILES     |
| Name of Registrant(s) DBA(s) of Registrant( Address of Registrant( Company Web Addres Regulatory Contact Pe Regulatory Contact Pe Contact Person for An                 | verizon Enterpr (s) 1320 N. Courtho (ss verizonld.com (crson(s) Connie Wightman, Tourson's Email Address cwig                                                                                                                                                                                                                                                                | se Solutions suse Road, 9 <sup>th</sup> Floor, Arlington, echnologies Management, Inc. thtman@tminc.com n, Technologies Management, Inc.                                                                                                                                                                                                                                                                                                                                                                   | Phone (407)                                                                                                                                                                                       | 740-8575 Fax                                                                                                        | (407) 740-0613                  |
| Consumer Contact Inf                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                              | fillian, Bell Atlantic<br>ons, Inc, d/b/a Verizon Long                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Phone (972)                                                                                                                                                                                       | 717-2269                                                                                                            |                                 |
| Date 1/25/07                                                                                                                                                            | TRF Docket 90<br>No.                                                                                                                                                                                                                                                                                                                                                         | - 5721 -CT-TRF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <u>or</u>                                                                                                                                                                                         | -                                                                                                                   | -TP-TRF                         |
| Motion for waiver(s) f<br>Company Type (check<br>CTS (IXC)<br>Other (explain)  NOTE: This form must<br>in Case No. 99-998-TH<br>UNC. It is preferable<br>review period. | all applicable):  ILEC  accompany all applications fi P-COI, as well as by ILECs fil                                                                                                                                                                                                                                                                                         | ☐ Yes  S ■ No [Note: waiver(s) tolls any ☐ CLEC  ed by telecommunication service pung an ARB or NAG case pursuant as of fillings, but if you do so, you if                                                                                                                                                                                                                                                                                                                                                 | ☐ CMRS  roviders subject to the to the guidelines est                                                                                                                                             | Commission's rule                                                                                                   | o. 96-463-TP-                   |
| 1 (AAC) Ap<br>2 (ABN) Ab                                                                                                                                                | oplication to Amend Certificat<br>pandonment of all Services                                                                                                                                                                                                                                                                                                                 | e by a CLEC to modify Serving A                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                   | - ,                                                                                                                 | LECOLOT                         |
| copies)  c 3 (ACE) No  c a. Switche  c 4 (ACO) LE  c 5 (ACN) LE  c 6 (AEC) Ca  NOTE: see  c 7 (AMT) LE  c 8 (ARB) Ag                                                    | ed Local                                                                                                                                                                                                                                                                                                                                                                     | b. CTS (14-day approva-<br>oviders other than CMRS (30-day<br>d local c. CTS d. Local<br>hership (30-day approval, 10 copies)<br>(30-day approval, 10 copies)<br>andment to an agreement approved<br>this form for all other contract fil<br>0 copies)<br>(96-463-TP-COI for applicable pro<br>int for Tier I Services, Application                                                                                                                                                                        | approval, 7 copies);<br>and CTS                                                                                                                                                                   | for CMRS, see item (explain) ase (30-day approv                                                                     | al, 7 copies)                   |
| a. Tie                                                                                                                                                                  | r 1 (and Carrier-to-Carrier tar  Pre-filing submittal (3  ii. New End User Service with OCC for Tier 1 re ii. New End User Service v. New Carrier-to-Carrie v. Change in Terms and o vi. Grandfather service (3  vii. Initial Carrier-to-Carri viii. Withdrawal of Tier 1 s  celassification of Service Amo xtual revision with no effect o polication to Transfer Certifica | off filings as set-forth in 95-845-Tl D-day pre-filing submittal with State which has been preceded by a 30-sidential services (0-day filing, 10 (NOT preceded by a 30-day filing. Service which has been preceded Conditions, textual revision, corresponding approval, 10 copies) or Services Tariff subsequent to A dervice must be filed as an "ATW" ng Tiers (NOT automatic, 10 copien rates for non-specific or non-tiet (30-day approval, 7 copies) ransaction Between Utilities (30-day approval). | off and OCC; <b>Do Not</b> -day pre-filing subm (copies) g submittal, 30-day a l by a 30-day pre-filing tion of error, etc. (3) CE approval (60-day (not an "ATA" - see es) r service (30-day app | pproval, 10 copies) ng with Staff (0-da 0-day approval, 10 v approval, 10 copies vitem 12, below proval, 10 copies) | y filing, 10 copies)<br>copies) |

| □ <b>12</b>                  | (ATW)                                                                          | Application to Withdraw a Tier 1 Service                                                                                                                                                                                                                                                                                                                                                                                                     |
|------------------------------|--------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                              |                                                                                | ☐ a. CLEC (60-day approval, 10 copies) ☐ b. ILEC (NOT automatic, 10 copies)                                                                                                                                                                                                                                                                                                                                                                  |
| n 13                         | (CIO)                                                                          | Application for Change in Operations by Non-LEC Providers (0-day notice, 7 copies)                                                                                                                                                                                                                                                                                                                                                           |
| n 14                         | (NAG)                                                                          | Negotiated Interconnection Agreement Between Carriers (0-day effective, 90-day approval, 8 copies)                                                                                                                                                                                                                                                                                                                                           |
| o 15                         | (RCC)                                                                          | For CMRS providers only to Register or to Notify of a Change in Operations (0-day notice, 7 copies)                                                                                                                                                                                                                                                                                                                                          |
| □ <b>1</b> 6                 | (SLF)                                                                          | Self-complaint Application                                                                                                                                                                                                                                                                                                                                                                                                                   |
|                              |                                                                                | EC only -Tier 1 (60-day automatic, 10 copies)                                                                                                                                                                                                                                                                                                                                                                                                |
|                              | 🗆 b. Int                                                                       | roduce or increase maximum price range for Non-Specific Service Charge (60-day approval, 10 copies)                                                                                                                                                                                                                                                                                                                                          |
| o 17                         | (UNC)                                                                          | Unclassified (explain) (NOT automatic, 15 copies)                                                                                                                                                                                                                                                                                                                                                                                            |
| <b>#</b> 18                  | (ZTA)                                                                          | Unclassified (explain) (NOT automatic, 15 copies)  Tariff Notification Involving only Tier 2 Services  Notifications do not require as involving an Approval                                                                                                                                                                                                                                                                                 |
|                              | NOTE:                                                                          | Notifications do not require or imply Commission Approval.                                                                                                                                                                                                                                                                                                                                                                                   |
|                              |                                                                                | w End User Service (0-day notice, 10 copies)                                                                                                                                                                                                                                                                                                                                                                                                 |
|                              |                                                                                | ange in Terms and Conditions, textual revision, correction of error, etc. (0-day notice, 10 copies)                                                                                                                                                                                                                                                                                                                                          |
|                              |                                                                                | thdrawal of service (0-day notice, 10 copies)                                                                                                                                                                                                                                                                                                                                                                                                |
| פו ם                         | Other                                                                          | (explain)(NOT automatic, 15 copies)                                                                                                                                                                                                                                                                                                                                                                                                          |
| THE □ 20 □ 21 □ 22 □ 23 □ 24 | Introduction New Price a. Tier 1 Designation Update to Annual Tan permitted of | ARE TRF FILINGS ONLY, NOT NEW CASES (0-day notice, 3 copies) on or Extension of Promotional Offering List Rate for Existing Service  b. Tier 2 on of Registrant's Process Agent(s) Registrant's Maps riff Option For Tier 2 Services – indicate which option you intend to adopt to maintain the tariff. NOTE, changing options is only once per calendar year.  Tariff  Electronic Tariff. If electronic, provide the tariff's web address: |
| <u>THE</u> □ 25              |                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                              |                                                                                | icate which of the following exhibits have been filed. The numbers (corresponding to the list on page (1) and icate, at a minimum, the types of cases in which the exhibit is required:                                                                                                                                                                                                                                                      |
|                              | [all]                                                                          | A copy of any motion for waiver of O.A.C. rule(s) associated with this filing. NOTE: the filing of a motion for waiver toll any automatic timeframe associated with this filing                                                                                                                                                                                                                                                              |

| [all]       | A copy of any motion for waiver of O.A.C. rule(s) associated with this filing. NOTE: the filing of a motion for waiver tolls any automatic timeframe associated with this filing.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|-------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| [3]         | Completed Service Requirements Form.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| [3, 9(vii)] | A copy of registrant's proposed tariffs. (Carrier-to-Carrier resale tariff also required if facilities-based)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| [3]         | Evidence that the registrant has notified the Ohio Department of Taxation of its intent to conduct operations as a telephone utility in the State of Ohio.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| [3]         | Brief description of service(s) proposed.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| [3a-b,3d]   | Explanation of whether applicant intends to provide resold services, facilities-based services, or both resold and facilities-based services.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| [3a-b,3d]   | Explanation as to whether CLEC currently offers CTS services under separate CTS authority, and whether it will be including those services within its CLEC filing, or maintaining such CTS services under a separate affiliate.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| [3a-b,3d]   | Explanation of how the proposed services in the proposed market area are in the public interest.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| [3a-b,3d]   | Description of the proposed market area.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| [3a-b,3d]   | Description of the class of customers (e.g., residence, business) that the applicant intends to serve.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| [3a-b,3d]   | <ol> <li>Documentation attesting to the applicant's financial viability, including the following:         <ol> <li>An executive Summary describing the applicant's current financial condition, liquidity, and capital resources.</li> <li>Describe internally generated sources of cash and external funds available to support the applicant's operations that are the subject of this certification application.</li> </ol> </li> <li>Copy of financial statements (actual and pro forma income statement and a balance sheet). Indicate if financial statements are based on a certain geographical area(s) or information in other jurisdictions</li> <li>Documentation to support the applicant's cash an funding sources.</li> </ol> |
| [3a-d]      | Documentation attesting to the applicant's technical and managerial expertise relative to the proposed service offering(s) and proposed service area.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| [3a-d]      | Documentation indicating the applicant's corporate structure and ownership.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| [3a-b,3d]   | Information regarding any similar operations in other states. Also, if this company has been previously certified in the State of Ohio, include that certification number.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| [3a-b,3d]   | Verification that the applicant will maintain local telephony records separate and apart from any other accounting records in accordance with the GAAP.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| [3a-b,3d]   | Verification of compliance with any affiliate transaction requirements.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| [3a-b,3d]   | Explanation as to whether rates are derived through (check all applicable): interconnection agreement, retail tariffs, or resale tariffs.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| [1,3a-b,3d] | Explanation as to which service areas company currently has an approved interconnection or resale agreement.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

|   | [3a-b,3d, 9a(i-iii)]      | Explanation of whether applicant intends to provide Local Services which require payment in advance of Customer receiving dial tone.                                                                                                       |
|---|---------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|   | [3a,3b,3d,<br>9a,(i-iii)] | Tariff sheet(s) listing the services and associated charges that must be paid prior to customer receiving dial tone (if applicable).                                                                                                       |
|   | [3a-b,3d,8]               | Letters requesting negotiation pursuant to Sections 251 and 252 of the Telecommunications Act of 1996 and a proposed timeline for construction, interconnection, and offering of services to end users.                                    |
|   | [3-5,7,10-11,13]          | Certification from Ohio Secretary of State as to party's proper standing (domestic or foreign corporation, authorized use of fictitious name, etc.). In transfer of certificate cases, the transferee's good standing must be established. |
|   | [3-4,7,10-11,13]          | List of names, addresses, and phone numbers of officers and directors, or partners.                                                                                                                                                        |
|   | [3]                       | A sample copy of the customer bill and disconnection notice the applicant plans to utilize.                                                                                                                                                |
| # | [1,4,9,10-13,16-21]       | Copy of superseded tariff sheet(s) & price list(s), if applicable, marked as Exhibit A.                                                                                                                                                    |
|   | [1,4,9,10-13,16-21]       | Copy of revised tariff sheets & price lists, marked as Exhibit B.                                                                                                                                                                          |
|   | [3]                       | Provide a copy of any customer application form required in order to establish residential service, if applicable.                                                                                                                         |
|   | [1-2,4-7,9,12-            | Description of and rationale for proposed tariff changes, including a complete description of the service(s) proposed or affected                                                                                                          |
|   | 13,16,18-23,25]           | Specify for each service affected whether it is business; presidence; or both. Also indicate whether it is a switched or dedicated service. Include this information in either the cover letter or Exhibit C.                              |

|   | [1,2,4,9a(v-vi),    | Specify which notice procedure has been/will be utilized: direct mail;   bill insert; bill notation or electronic mail. NOTE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|---|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|   | 5,10,16,18(b-c),    | Tier 1 price list increases must be within an approved range of rates.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| l | 211                 | ☐ SLF Filings – Do NOT send customer notice until it has been reviewed and approved by Commission Staff                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 0 | [2,4-5,9a(v),       | Copy of real time notice which has been/will be provided to customers.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|   | 9b, 10,12-13,16,    | NOTE: SLF Filings – Do NOT send customer notice until it has been reviewed and approved by Commission Staff                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|   | 18(b-c),20-21]      | TO THE DELICATION OF THE PRINCIPLE AND THE PRINC |
| 0 | [1,2,5,9a(v),11-13, | Affidavit attesting that customer notice has been provided.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|   | 18, 21 (increase    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|   | only)]              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|   | [2,12]              | Copy of Notice which has been provided to ILEC(s).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|   | [2,12]              | Listing of Assigned (NPA) NXX's where in the LECs (NPA) NXX's would be reassigned.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|   | [2,4,10,12-13,]     | List of Ohio exchanges specifically involved or affected.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|   | [14]                | The interconnection agreement adopted by negotiation or mediation.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|   | [15]                | For commercial mobile radio service providers, a statement affirming that registrant has obtained all necessary federal authority                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|   |                     | to conduct operations being proposed, and that copies have been furnished by cellular, paging, and mobile companies to this                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|   |                     | Commission of any Form 401, 463, and / or 489 which the applicant has filed with the Federal Communications Commission.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|   | [15]                | Exhibits must include company name, address, contact person, service description, and evidence of registration with the Ohio                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|   |                     | Secretary of State.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|   | [24]                | Affidavit that total price of contract exceeds total cost of all regulated services.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|   | [5,13]              | New title sheet with proposed new company name.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|   | [1,3,13]            | For CLECs, List of Ohio Exchanges the applicant intends to serve (Use spreadsheet from:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|   |                     | http://www.puc.state.oh.us/puco/forms/form.cfm?doc_id=357).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|   | [1,3a-b,3d,7,       | Maps depicting the proposed serving and calling areas of the applicant.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|   | 10,13, 23]          | If Mirroring Large ILEC exchanges for both serving area and local calling areas: • Serving area must be clearly reflected                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|   |                     | on an Ohio map attached to tariffs and textually described in tariffs by noting that it is reflecting a particular large                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| ļ |                     | ILEC/CLEC territory, and listing the involved exchanges. • Local calling areas must be clearly reflected on an Ohio map                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|   |                     | attached to the tariffs, and/or clearly delineated in tariffs, including a complete listing of each exchange being served and all                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|   |                     | exchanges to which local calls can be made from each of those exchanges.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|   |                     | If Self-defining serving area and/or local calling area as an area other than that of the established ILEC exchange(s): •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|   |                     | Serving Area must be clearly reflected on an Ohio map attached to the tariffs, and textually described in tariffs by listing the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|   |                     | involved exchanges. • Local Calling Areas must be described in the tariff through textual delineation and clear maps. Maps                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|   |                     | for self-defined serving and local calling areas are required to be traced on United States Geological Survey topography                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|   |                     | maps. These maps are the Standard Topographic Quadrangle maps, 7.5 minute 1:24,000.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|   |                     | Other information requested by the Commission staff.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|   | [3]                 | Initial certification that includes Tier 2 Services, indicate which option you intend to adopt to maintain the tariff:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|   |                     | ■ Paper Tariff Electronic Tariff - If electronic, provide the web address for the tariff:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|   |                     | ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|   |                     | $oldsymbol{\beta}$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

III. Registrant hereby attests to its compliance with the following requirements in the Service Requirements Form, as well as all pertinent entries and orders issued by the Commission with respect to these issues. Further, registrant hereby affirms that it will maintain with its TRF docket an up-to-date, properly marked, copy of the Service Requirements Form available for public inspection.

#### MANDATORY REQUIREMENTS FOR ALL BASIC LOCAL EXCHANGE AND CTS PROVIDERS:

[x] Sales tax

[x] Minimum Telephone Service Standards (MTSS)

[x] Surcharges

#### MANDATORY REQUIREMENTS FOR ALL BASIC LOCAL EXCHANGE PROVIDERS:

[x] 1+ IntraLATA Presubscription

### SERVICE REQUIREMENTS FOR PROVISION OF CERTAIN SERVICES (CHECK ALL APPLICABLE):

- Discounts for Persons with Communication Disabilities and the Telecommunication Relay Service [Required if toll service provided]
- Emergency Services Calling Plan [Required if toll service provided]
- Alternative Operator Service (AOS) requirements [Required for all providing AOS (including inmate services) service]
- Limitation of Liability Language [Required for all who have tariff language that may limit their liability]
- Termination Liability Language [Required for all who have early termination liability language in their tariffs]
  Service Connection Assistance (SCA) [Required for all LECs]

Local Number Portability and Number Pooling [Required for facilities-based LECs]

Package Language [Required for tariffs containing packages or service bundles containing both local and toll and/or non-regulated services]

IV. List names, titles, phone numbers, and addresses of those persons authorized to respond to inquiries from the Consumer Services Department on behalf of the applicant regarding end-user complaints:

John Broten, President, NYNEX Long Distance d/b/a Verizon Enterprise Solutions

V. List names, titles, phone numbers, and addresses of those persons authorized to make and/or affirm or verify filings at the Commission on behalf of the applicant:

Connie Wightman, Consultant to Verizon Enterprise Solutions, Technologies Management, Inc, P.O. Drawer 200, Winter Park, FL 32790 (407) 740-8575

or John Broten, President, NYNEX Long Distance d/b/a Verizon Enterprise Solutions, 1320 N. Courthouse Road, 9th Floor, Arlington, VA 22201,

<u>NOTE</u>: An annual report is required to be filed with the Commission by each company on an annual basis. The annual report form will be sent for completion to the address and individual(s) identified in this Section unless another address or individual is so indicated.

VI. List Name(s), DBA(s) and PUCO Certification Number(s) of any affiliates you have operating in Ohio under PUCO authority, whether Telecommunication or other. (If needed, use a separate sheet and check here: )

Bell Atlantic Communications, Inc. d/b/a Verizon Long Distance; # 90-5680-CT-TRF

Verizon Select Services, Inc.; #90-9243-TP-TRF

Verizon Telephone Operating Companies (Verizon North); #96-1237-TP-ATA

## **AFFIDAVIT**

# Compliance with Commission Rules and Service Standards

I am an officer of the applicant corporation, NYNEX Long Distance d/b/a Verizon Enterprise Solutions, and am authorized to make this statement on its behalf. I attest that these tariffs comply with all applicable rules, including the Minimum Telephone Service Standards (MTSS) for the state of Ohio. I understand that tariff notification filings do not imply Commission approval and that the Commission's rules, including the Minimum Telephone Service Standards, as modified and clarified from time to time, supersede any contradictory provisions in our tariff. We will fully comply with the rules of the state of Ohio and understand that noncompliance can result in various penalties, including the suspension of our certificate to operate within the state of Ohio.

| I declare under penalty of perjury that the foregoing is true and correct.                                                                         | <u>\</u>                                                      |                          |                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|--------------------------|---------------------------|
| Executed on1/25/07at Winter Park, Florida (Date) (Location)                                                                                        | C.W.D.                                                        |                          | 1/25/07                   |
| * This affidavit is required for every tariff-affecting filing authorized agent of the applicant.                                                  | *(Signature and Title)  3. It may be signed by co             | ounsel or an officer     | (Date)                    |
| I, Connie M. Wightman, verify that I have utilized, verbatim, the Comm<br>submitted here, and all additional information submitted in connection w | vitly this case, is true and correction (Signature and Title) | recitto the best of my k | cnowledge.<br>            |
| *Verification is required for every filing. It may be signed by applicant.                                                                         | counsel or an officer of                                      | the applicant, or an     | : authorized agent of the |
| Send your completed Application Form, including all req                                                                                            | uired attachments as well                                     | l as the required nu     | mber of copies, to:       |

**Public Utilities Commission of Ohio** 

Attention: Docketing Division (or to the Telecommunications Division Chief if a prefiling submittal)
180 East Broad Street, Columbus, OH 43215-3793

EXHIBIT A

SUPERCEDED TARIFF PAGES

### **CHECK SHEET**

Pages inclusive of this tariff are effective as of the date shown at the bottom of the respective pages. Original and revised pages, as named below, comprise all changes from the original tariff and are currently in effect as of the date on the bottom of this page.

| PAGE | REVISION           | PAGE            | REVISION |   | PAGE | REVISION |
|------|--------------------|-----------------|----------|---|------|----------|
| 1    | First              | 25.1            | Second   |   | 35   | Fourth   |
| 2    | 51 <sup>st</sup> * | 26              | Second   |   | 36   | Fourth   |
| 2.1  | $27^{th}$          | 27              | Second   |   | 36.1 | First    |
| 3    | Original           | <b>27.0</b> .1  | Second   |   | 37   | Original |
| 4    | Original           | 27.1            | Second   |   | 38   | Original |
| 5    | Original           | 27.2            | First    |   | 39   | Second   |
| 6    | Original           | 27.3            | Third    |   | 40   | First    |
| 7    | First              | 28              | Third    |   | 41   | First    |
| 8    | First              | 29              | Eighth   | • | 42   | First    |
| 9    | First              | 29.1            | First    |   | 43   | First    |
| 10   | Original           | 30              | Fifth    |   | 44   | Second   |
| 11   | Original           | 31              | Fifth    |   |      |          |
| 12   | First              | 32              | Fifth    |   |      |          |
| 13   | First              | 33              | Fifth    |   |      |          |
| 14   | First              | 33.1            | First    |   |      |          |
| 15   | First              | 33.2            | First    |   |      |          |
| 16   | Original           | 33.3            | First    |   |      |          |
| 17   | Original           | 34              | Third    |   |      |          |
| 18   | First              | <b>34.</b> 1    | Third    |   |      |          |
| 19   | Original           | 34.2            | First    |   |      |          |
| 20   | First              | 34.2.1          | Original | * |      |          |
| 20.1 | Original           | 34.2.2          | Original | * |      |          |
| 20.2 | Original           | 34.2.3          | Original | * |      |          |
| 20.3 | Original           | 34. <b>2.</b> 4 | Original | * |      |          |
| 21   | Original           | 34.2.5          | Original | * |      |          |
| 22   | Original           | 34.3            | Second   |   |      |          |
| 23   | Original           | 34.4            | First    |   |      |          |
| 24   | First              | 34.5            | Fourth   |   |      |          |
| 24.1 | Sixth              | 34.6            | Third    |   |      |          |
| 25   | Fifth              | 34.7            | Second   |   |      |          |
|      |                    | 34.8            | Original |   |      |          |

Issued: December 18, 2006 Effective Date: December 19, 2006

(N)

### SECTION 3 - DESCRIPTION OF SERVICE AND RATES, (Cont'd.)

## 3.7 Business Unlimited Long Distance Service, (cont'd.)

### 3.7.5 Bundled Service Option, (cont'd.)

#### B. Limitations of Service

The Bundled Service Option is only offered where billing and system capabilities exist and is not available with local business FlexGrow services, PBX trunks, ground start lines or trunks, ISDN services, remote call forwarding services, foreign exchange services, foreign central office services, foreign zone services, public telephone services, flexpath, and analog to digital conversion digital PBX services or the equivalents of any such services.

The Bundled Service Option is only available to Customers who, at the time of service initiation, subscribes to 25 or fewer qualifying business dial tone lines (voice grade or voice grade equivalent) from an affiliated local exchange company. The Bundled Service Option may only be purchased on up to ten (10) qualifying lines.

Specific call detail information is not available with this flat rated service.

The Customer who forfeits eligibility for this Bundled Service Option and remains presubscribed to the Company's service will default to either FirmRate Plus or SimpleOptions depending on the Customer's presubscribed service on other lines. If there is no other plan on the account, the Customer will default to FirmRate Plus Service, FirmRate Advantage Service or FlexDistance Service as described in Section 3 unless the Customer selects another Optional Business Service.

This service may only be used for voice applications and may not be used for the transmission of data, for Internet connections, or for any other non-voice application. This service may also not be used for autodialing. If the Customer uses this service for any non-eligible purpose, including but not limited to the examples noted above, the Company may immediately suspend, restrict or cancel the service pursuant to Section 2.4 of this tariff. The Company may also adjust the charges to FirmRate Plus Service, FirmRate Advantage Service or FlexDistance Service as described in Sectioned in Section 3, as a result of the Customer's use of the service for non-eligible uses as set forth herein. The Company will notify the Customer if it appears upon review of the usage patterns that a potential misuse of the service is occurring. In such event, the Customer will be offered an opportunity to explain any apparent misuse of service prior to implementation of corrective measures described herein.

(N)

Issued: December 18, 2006

Effective Date: December 19, 2006

EXHIBIT B

AMENDED TARIFF PAGES

#### CHECK SHEET

Pages inclusive of this tariff are effective as of the date shown at the bottom of the respective pages. Original and revised pages, as named below, comprise all changes from the original tariff and are currently in effect as of the date on the bottom of this page.

| PAGE | REVISION           |   | PAGE   | REVISION | PAGE | REVISION |
|------|--------------------|---|--------|----------|------|----------|
| 1    | First              |   | 25.1   | Second   | 35   | Fourth   |
| 2    | 52 <sup>nd</sup>   | * | 26     | Second   | 36   | Fourth   |
| 2.1  | $27^{\mathrm{th}}$ |   | 27     | Second   | 36.1 | First    |
| 3    | Original           |   | 27.0.1 | Second   | 37   | Original |
| 4    | Original           |   | 27.1   | Second   | 38   | Original |
| 5    | Original           |   | 27.2   | First    | 39   | Second   |
| 6    | Original           |   | 27.3   | Third    | 40   | First    |
| 7    | First              |   | 28     | Third    | 41   | First    |
| 8    | First              |   | 29     | Eighth   | 42   | First    |
| 9    | First              |   | 29.1   | First    | 43   | First    |
| 10   | Original           |   | 30     | Fifth    | 44   | Second   |
| 11   | Original           |   | 31     | Fifth    |      |          |
| 12   | First              |   | 32     | Fifth    |      |          |
| 13   | First              |   | 33     | Fifth    |      |          |
| 14   | First              |   | 33.1   | First    |      |          |
| 15   | First              |   | 33.2   | First    |      |          |
| 16   | Original           |   | 33.3   | First    |      |          |
| 17   | Original           |   | 34     | Third    |      |          |
| 18   | First              |   | 34.1   | Third    |      |          |
| 19   | Original           |   | 34.2   | First    |      |          |
| 20   | First              |   | 34.2.1 | Original |      |          |
| 20.1 | Original           |   | 34.2.2 | First *  |      |          |
| 20.2 | Original           |   | 34.2.3 | Original |      |          |
| 20.3 | Original           |   | 34.2.4 | Original |      |          |
| 21   | Original           |   | 34.2.5 | Original |      |          |
| 22   | Original           |   | 34.3   | Second   |      |          |
| 23   | Original           |   | 34.4   | First    |      |          |
| 24   | First              |   | 34.5   | Fourth   |      |          |
| 24.1 | Sixth              |   | 34.6   | Third    |      |          |
| 25   | Fifth              |   | 34.7   | Second   |      |          |
|      |                    |   | 34.8   | Original |      |          |

Issued: January 26, 2007 Effective Date: January 27, 2007

#### SECTION 3 - DESCRIPTION OF SERVICE AND RATES, (Cont'd.)

# 3.7 Business Unlimited Long Distance Service, (cont'd.)

## 3.7.5 Bundled Service Option, (cont'd.)

#### B. Limitations of Service

The Bundled Service Option is only offered where billing and system capabilities exist and is not available with local business FlexGrow services, PBX trunks, ground start lines or trunks, ISDN services, remote call forwarding services, foreign exchange services, foreign central office services, foreign zone services, public telephone services, flexpath, and analog to digital conversion digital PBX services or the equivalents of any such services.

The Bundled Service Option is only available to Customers who, at the time of service initiation, subscribes to 25 or fewer qualifying business dial tone lines (voice grade or voice grade equivalent) from an affiliated local exchange company. The Bundled Service Option may only be purchased on up to ten (10) qualifying lines.

Specific call detail information is not available with this flat rated service.

The Customer who forfeits eligibility for this Bundled Service Option and remains presubscribed to the Company's service will default to either FirmRate Plus or SimpleOptions depending on the Customer's presubscribed service on other lines. If there is no other plan on the account, the Customer will default to FirmRate Plus Service, FirmRate Advantage Service or FlexDistance Service as described in Section 3 unless the Customer selects another Optional Business Service.

This service may only be used for voice applications and may not be used for the transmission of data, for Internet connections, or for any other non-voice application. This service may also not be used for autodialing. In order to be eligible for this plan, the Company must be able to verify that the Customer meets these eligibility requirements. The Customer who no longer meets these eligibility requirements will not be eligible for this plan. The Company will notify the Customer that they no longer meet the eligibility requirements and, as such, will allow the Customer an opportunity to discuss options, such as an alternative plan. The Company may also adjust the charges to FirmRate Plus Service, FirmRate Advantage Service or FlexDistance Service as described in Sectioned in Section 3, as a result of the Customer's use of the service for non-eligible uses as set forth herein. The Company will notify the Customer if it appears upon review of the usage patterns that a potential misuse of the service is occurring. In such event, the Customer will be offered an opportunity to explain any apparent misuse of service prior to implementation of corrective measures described herein.

**(T)** 

(T)

Issued: January 26, 2007 Effective Date: January 27, 2007

EXHIBIT C

**CUSTOMER NOTICE** 

N/A

EXHIBIT D

Customer Notice Affidavit

N/A