

FILE



PAETEC

09-411-TP-SLF  
90-9096-TP-TRF 18  
RECEIVED-DOCKETING DIV

2009 MAY 14 PM 12:26

PUCO

May 11, 2009

Docketing Division  
Public Utilities Commission of Ohio  
180 East Broad Street  
Columbus, OH 43215 - 3793

RE: US LEC Communications, Inc. revisions to PUCO Tariff No. 1

Dear Sir or Madam:

US LEC Communications hereby submits revisions to PUCO Tariff No. 1. This filing increases Local Directory Assistance rates and is submitted with an issue date of May 22, 2009 and a requested effective date of June 22, 2009.

Customer notification will begin cycling May 22<sup>nd</sup>, and will not bill until the next cycle, giving customers a 30 day notice; a copy of the message is enclosed as well.

Affected Pages:

Third Revised Page 3

First Revised Page 72

Second Revised Page 4

First Revised Page 89

Should you have any questions please feel free to contact me at (585) 340-2709, or by email at [Katherine.Hoagland@PAETEC.com](mailto:Katherine.Hoagland@PAETEC.com).

Sincerely,

Katherine Hoagland  
Tariff & Regulatory Analyst

Enclosures

2009  
MAY 14 2009  
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 SM Date Processed MAY 14 2009

**The Public Utilities Commission of Ohio**  
**TELECOMMUNICATIONS APPLICATION FORM for ROUTINE PROCEEDINGS**  
(Effective: 01/18/2008)

In the Matter of the Application of US LEC Communications, )  
Inc. )  
to increase Local Directory Assistance rates )  
)

TRF Docket No. 90-9096

Case No. 09 - 411 - TP - SLF

NOTE: Unless you have reserved a Case # or are filing a Contract, leave the "Case No" fields BLANK.

Name of Registrant(s) US LEC Communications, Inc.

DBA(s) of Registrant(s) \_\_\_\_\_

Address of Registrant(s) 600 Willow Brook Office Park Fairport, NY 14450

Company Web Address www.paetec.com

Regulatory Contact Person(s) Judy Messenger

Phone 585-340-2822

Fax 585-770-2498

Regulatory Contact Person's Email Address Judy.Messeng@paetec.com

Contact Person for Annual Report Judy Messenger

Phone 585-340-2822

Address (if different from above) \_\_\_\_\_

Consumer Contact Information Laura Silivestro

Phone 585-340-3094

Address (if different from above) \_\_\_\_\_

Motion for protective order included with filing? ☐ Yes ☒ No

Motion for waiver(s) filed affecting this case? ☐ Yes ☒ No [Note: Waivers may toll any automatic timeframe.]

**Section I – Pursuant to Chapter 4901:11-6 OAC – Part I – Please indicate the Carrier Type and the reason for submitting this form by checking the boxes below. CMRS providers: Please see the bottom of Section II.**

NOTES: (1) For requirements for various applications, see the identified section of Ohio Administrative Code Section 4901 and/or the supplemental application form noted.

(2) Information regarding the number of copies required by the Commission may be obtained from the Commission's web site at [www.puco.ohio.gov](http://www.puco.ohio.gov) under the docketing information system section, by calling the docketing division at 614-466-4095, or by visiting the docketing division at the offices of the Commission.

Carrier Type <input type="checkbox"/> Other (explain below)	<input type="checkbox"/> ILEC	<input checked="" type="checkbox"/> CLEC	<input type="checkbox"/> CTS	<input type="checkbox"/> AOS/IOS
<b>Tier 1 Regulatory Treatment</b>				
Change Rates within approved Range	<input type="checkbox"/> TRF 1-6-04(B) (0 day Notice)	<input type="checkbox"/> TRF 1-6-04(B) (0 day Notice)		
New Service, expanded local calling area, correction of textual error	<input type="checkbox"/> ZTA 1-6-04(B) (0 day Notice)	<input type="checkbox"/> ZTA 1-6-04(B) (0 day Notice)		
Change Terms and Conditions, Introduce non-recurring service charges	<input type="checkbox"/> ATA 1-6-04(B) (Auto 30 days)	<input type="checkbox"/> ATA 1-6-04(B) (Auto 30 days)		
Introduce or Increase Late Payment or Returned Check Charge	<input type="checkbox"/> ATA 1-6-04(B) (Auto 30 days)	<input type="checkbox"/> ATA 1-6-04(B) (Auto 30 days)		
Business Contract	<input type="checkbox"/> CTR 1-6-17 (0 day Notice)	<input type="checkbox"/> CTR 1-6-17 (0 day Notice)		
Withdrawal	<input type="checkbox"/> ATW 1-6-12(A) (Non-Auto)	<input type="checkbox"/> ATW 1-6-12(A) (Auto 30 days)		
Raise the Ceiling of a Rate	Not Applicable	<input checked="" type="checkbox"/> SLF 1-6-04(B) (Auto 30 days)		
<b>Tier 2 Regulatory Treatment</b>				
Residential - Introduce non-recurring service charges	<input type="checkbox"/> TRF 1-6-05(E) (0 day Notice)	<input type="checkbox"/> TRF 1-6-05(E) (0 day Notice)		
Residential - Introduce New Tariffed Tier 2 Service(s)	<input type="checkbox"/> TRF 1-6-05(C) (0 day Notice)	<input type="checkbox"/> TRF 1-6-05(C) (0 day Notice)	<input type="checkbox"/> TRF 1-6-05(C) (0 day Notice)	
Residential - Change Rates, Terms and Conditions, Promotions, or Withdrawal	<input type="checkbox"/> TRF 1-6-05(E) (0 day Notice)	<input type="checkbox"/> TRF 1-6-05(E) (0 day Notice)	<input type="checkbox"/> TRF 1-6-05(E) (0 day Notice)	
Residential - Tier 2 Service Contracts	<input type="checkbox"/> CTR 1-6-17 (0 day Notice)	<input type="checkbox"/> CTR 1-6-17 (0 day Notice)	<input type="checkbox"/> CTR 1-6-17 (0 day Notice)	
Commercial (Business) Contracts	Not Filed	Not Filed	Not Filed	
Business Services (see "Other" below)	Detariffed	Detariffed	Detariffed	
Residential & Business Toll Services (see "Other" below)	Detariffed	Detariffed	Detariffed	

## Section I – Part II – Certificate Status and Procedural

Certificate Status	ILEC	CLEC	CTS	AOS/IOS
Certification (See Supplemental ACE form)		<input type="checkbox"/> ACE 1-6-10 (Auto 30 days)	<input type="checkbox"/> ACE 1-6-10 (Auto 30 days)	<input type="checkbox"/> ACE 1-6-10 (Auto 30 days)
Add Exchanges to Certificate	<input type="checkbox"/> ATA 1-6-09(C) (Auto 30 days)	<input type="checkbox"/> AAC 1-6-10(F) (0 day Notice)	CLECs must attach a current CLEC Exchange Listing Form	
Abandon all Services - With Customers	<input type="checkbox"/> ABN 1-6-11(A) (Non-Auto)	<input type="checkbox"/> ABN 1-6-11(A) (Auto 90 day)	<input type="checkbox"/> ABN 1-6-11(B) (Auto 14 day)	<input type="checkbox"/> ABN 1-6-11(B) (Auto 14 day)
Abandon all Services - Without Customers		<input type="checkbox"/> ABN 1-6-11(A) (Auto 30 days)	<input type="checkbox"/> ABN 1-6-11(B) (Auto 14 day)	<input type="checkbox"/> ABN 1-6-11(B) (Auto 14 day)
Change of Official Name (See below)	<input type="checkbox"/> ACN 1-6-14(B) (Auto 30 days)	<input type="checkbox"/> ACN 1-6-14(B) (Auto 30 days)	<input type="checkbox"/> CIO 1-6-14(A) (0 day Notice)	<input type="checkbox"/> CIO 1-6-14(A) (0 day Notice)
Change in Ownership (See below)	<input type="checkbox"/> ACO 1-6-14(B) (Auto 30 days)	<input type="checkbox"/> ACO 1-6-14(B) (Auto 30 days)	<input type="checkbox"/> CIO 1-6-14(A) (0 day Notice)	<input type="checkbox"/> CIO 1-6-14(A) (0 day Notice)
Merger (See below)	<input type="checkbox"/> AMT 1-6-14(B) (Auto 30 days)	<input type="checkbox"/> AMT 1-6-14(B) (Auto 30 days)	<input type="checkbox"/> CIO 1-6-14(A) (0 day Notice)	<input type="checkbox"/> CIO 1-6-14(A) (0 day Notice)
Transfer a Certificate (See below)	<input type="checkbox"/> ATC 1-6-14(B) (Auto 30 days)	<input type="checkbox"/> ATC 1-6-14(B) (Auto 30 days)	<input type="checkbox"/> CIO 1-6-14(A) (0 day Notice)	<input type="checkbox"/> CIO 1-6-14(A) (0 day Notice)
Transaction for transfer or lease of property, plant or business (See below)	<input type="checkbox"/> ATR 1-6-14(B) (Auto 30 days)	<input type="checkbox"/> ATR 1-6-14(B) (Auto 30 days)	<input type="checkbox"/> CIO 1-6-14(A) (0 day Notice)	<input type="checkbox"/> CIO 1-6-14(A) (0 day Notice)
<b>Procedural</b>				
Designation of Process Agent(s)	<input type="checkbox"/> TRF (0 day Notice)	<input type="checkbox"/> TRF (0 day Notice)	<input type="checkbox"/> TRF (0 day Notice)	<input type="checkbox"/> TRF (0 day Notice)

## Section II – Carrier to Carrier (Pursuant to 4901:1-7), CMRS and Other

Carrier to Carrier	ILEC	CLEC		
Interconnection agreement, or amendment to an approved agreement	<input type="checkbox"/> NAG 1-7-07 (Auto 90 day)	<input type="checkbox"/> NAG 1-7-07 (Auto 90 day)		
Request for Arbitration	<input type="checkbox"/> ARB 1-7-09 (Non-Auto)	<input type="checkbox"/> ARB 1-7-09 (Non-Auto)		
Introduce or change c-t-c service tariffs,	<input type="checkbox"/> ATA 1-7-14 (Auto 30 day)	<input type="checkbox"/> ATA 1-7-14 (Auto 30 day)		
Introduce or change access service pursuant to 07-464-TP-COI	<input type="checkbox"/> ATA (Auto 30 day)			
Request rural carrier exemption, rural carrier suspension or modification	<input type="checkbox"/> UNC 1-7-04 or (Non-Auto) 1-7-05	<input type="checkbox"/> UNC 1-7-04 or (Non-Auto) 1-7-05		
Pole attachment changes in terms and conditions and price changes.	<input type="checkbox"/> UNC 1-7-23(B) (Non-Auto)	<input type="checkbox"/> UNC 1-7-05 (Non-Auto)		
<b>CMRS Providers</b> See 4901:1-6-15	<input type="checkbox"/> RCC [Registration & Change in Operations] (0 day)		<input type="checkbox"/> NAG [Interconnection Agreement or Amendment] (Auto 90 days)	
<b>Other*</b> (explain) _____				

\*NOTE: During the interim period between the effective date of the rules and an Applicant's Detariffing Filing, changes to existing business Tier 2 and all toll services, including the addition of new business Tier 2 and all new toll services, will be processed as 0-day TRF filings, and briefly described in the "Other" section above.

All Section I and II applications that result in a change to one or more tariff pages require, at a minimum, the following exhibits. Other exhibits may be required under the applicable rule(s). ACN, ACO, AMT, ATC, ATR and CIO applications see the 4901:1-6-14 Filing Requirements on the Commission's Web Page for a complete list of exhibits.

Exhibit	Description:
A	The tariff pages subject to the proposed change(s) as they exist before the change(s)
B	The Tariff pages subject to the proposed change(s), reflecting the change, with the change(s) marked in the right margin.
C	A short description of the nature of the change(s), the intent of the change(s), and the customers affected.
D	A copy of the notice provided to customers, along with an affidavit that the notice was provided according to the applicable rule(s).

**Section III. – Attestation**

**Registrant hereby attests to its compliance with pertinent entries and orders issued by the Commission.**

**AFFIDAVIT**

***Compliance with Commission Rules and Service Standards***

I am an officer/agent of the applicant corporation, US LEC Communications, Inc., and am authorized to make this statement on its behalf.  
(Name)


I attest that these tariffs comply with all applicable rules, including the Minimum Telephone Service Standards (MTSS) Pursuant to Chapter 4901:1-5 OAC 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.

Executed on (Date) May 11, 2009

at (Location) Fairport, NY

\*(Signature and Title)

  
Vice President &  
Associate General Counsel

(Date)

5/11/09

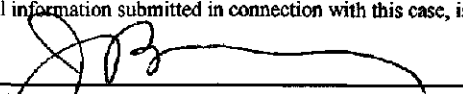
- *This affidavit is required for every tariff-affecting filing. It may be signed by counsel or an officer of the applicant, or an authorized agent of the applicant.*

**VERIFICATION**

I, John Messenger

verify that I have utilized the Telecommunications Application Form for Routine Proceedings provided by the Commission and that all of the information submitted here, and all additional information submitted in connection with this case, is true and correct to the best of my knowledge.

\*(Signature and Title)

  
Vice President &  
Associate General Counsel

(Date)

5/11/09

*\*Verification is required for every filing. It may be signed by counsel or an officer of the applicant, or an authorized agent of the applicant.*

***Send your completed Application Form, including all required attachments as well as the required number of copies, to:***

**Public Utilities Commission of Ohio  
Attention: Docketing Division  
180 East Broad Street, Columbus, OH 43215-3793**

***Or***

***Make such filing electronically as directed in Case No 06-900-AU-WVR***

**EXHIBIT**  
**A**

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CHECK SHEET

The pages of this tariff are effective as of the date shown. The original and revised pages named below contain all changes from the original tariff and are in effect on the date shown.

<u>PAGE</u>	<u>REVISION</u>	<u>PAGE</u>	<u>REVISION</u>
1	Second*	26	Original
2	Second*	27	Original
3	First*	28	Original
4	Original	29	Original
5	First*	30	Original
6	Original	31	Original
7	Original	32	Original
8	Original	33	Original
9	Original	34	Original
10	Original	35	First*
11	Original	36	Original
12	Original	37	Original
13	Original	38	Original
14	Original	39	Original
15	Original	40	Original
16	Original	41	Original
17	Original	42	Original
18	Original	43	Original
19	Original	44	Original
20	Original	45	Original
21	Original	46	Original
22	Original	47	Original
23	Original	48	Original
24	Original	49	Original
25	Original	50	Original

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Issued: July 1, 2008

Effective: July 1, 2008

Issued By:

Regulatory Manager –US LEC Communications

6801 Morrison Blvd.

Charlotte, North Carolina 28211

90-9096-TP-TRF

(T)

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CHECK SHEET

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<u>PAGE</u>	<u>REVISION</u>	<u>PAGE</u>	<u>REVISION</u>
51	Original	76	First*
52	First*	77	First*
53	First*	78	Original
54	First*	79	Original
55	First*	80	Original
56	First*	81	Original
57	First*	82	Original
58	First*	83	Original
59	First*	84	First*
60	First*	85	First*
61	First*	86	First*
62	First*	87	First*
63	First*	88	First*
64	First*	89	Original
65	First*	90	Original
66	Original	91	First*
67	Original		
68	Original		
69	Original		
70	Original		
71	Original		
72	Original		
73	Original		
74	Original		
75	Original		

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Issued: July 1, 2008

Effective: July 1, 2008

Issued By: Regulatory Manager –US LEC Communications  
6801 Morrison Boulevard  
Charlotte, North Carolina 28211  
**90-9096-TP-TRF**

(T)  
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(T)

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**SECTION 8 - MISCELLANEOUS SERVICES****8.4 Directory Assistance****8.4.1 Description**

A Customer may obtain Directory Assistance in determining telephone numbers within the State of Ohio by calling the Directory Assistance operator.

Directory Assistance charges apply for all requests for which the Company's facilities are used. Each number requested is charged as shown below. Requests for information other than telephone numbers will be charged the same rate as shown for the applicable request for telephone numbers.

A credit will be given for calls to Directory Assistance when:

- the Customer experiences poor transmission or is cut-off during the call,
- the Customer is given an incorrect telephone number, or
- the Customer inadvertently misdials an incorrect Directory Assistance NPA.

To receive a credit, the customer must notify the Company operator or Business Office of the problem experienced.

**8.4.2 Rates**

	Min:	Max:
Per Number Requested	\$0.56	\$0.94

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Issued: December 2, 1999

Effective: January 2, 2000

Issued By:

Tim Smoak- Regulatory Affairs Manager  
Transamerica Square  
401 North Tryon Street, Suite 1000  
Charlotte, North Carolina 28202  
90-9096-TP-TRF



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**SECTION 11 - PRICE LIST****11.6 Remote Call Forwarding On-Net**

	<u>Non-Recurring</u>	<u>Monthly Recurring</u>
Remote Call Forwarding On-Net (per number)	\$100.00	\$25.00

**11.7 Operator Services**

	<u>Per Call Charges</u>
Person-to-Person	\$3.50
Collect Calling	\$1.75
Third Number Billing	\$1.75
Calling Card	\$0.75

**11.8 Busy Line Verify and Line Interrupt Service**

	<u>Per Request</u>
Busy Line Verify Service	\$0.75
Busy Line Verify and Busy Line Interrupt Service	\$1.55

**11.9 Directory Assistance**

Per Number Requested	\$0.75
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**11.10 Service Implementation**

	<u>Non-Recurring</u>
Per Service Order	\$25.00

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Issued: December 2, 1999

Effective: January 2, 2000

Issued By:

Tim Smoak - Regulatory Affairs Manager  
Transamerica Square  
401 North Tryon Street, Suite 1000  
Charlotte, North Carolina 28202  
90-9096-TP-TRF

**EXHIBIT**  
**B**

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CHECK SHEET

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12	Original	37	Original
13	Original	38	Original
14	Original	39	Original
15	Original	40	Original
16	Original	41	Original
17	Original	42	Original
18	Original	43	Original
19	Original	44	Original
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21	Original	46	Original
22	Original	47	Original
23	Original	48	Original
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25	Original	50	Original

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Issued: May 22, 2009

Effective: June 22, 2009

Issued By:

Senior Manager –Regulatory Affairs  
6801 Morrison Boulevard  
Charlotte, North Carolina 28211  
90-9096-TP-TRF

(T)

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CHECK SHEET

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59	First	84	First
60	First	85	First
61	First	86	First
62	First	87	First
63	First	88	First
64	First	89	First *
65	First	90	Original
66	Original	91	First
67	Original		
68	Original		
69	Original		
70	Original		
71	Original		
72	1 <sup>st</sup> *		
73	Original		
74	Original		
75	Original		

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Issued: May 22, 2009

Effective: June 22, 2009

Issued By:

Senior Manager –Regulatory Affairs  
6801 Morrison Boulevard  
Charlotte, North Carolina 28211  
90-9096-TP-TRF(T)  
|  
(T)

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**SECTION 8 - MISCELLANEOUS SERVICES****8.4    Directory Assistance****8.4.1    Description**

A Customer may obtain Directory Assistance in determining telephone numbers within the State of Ohio by calling the Directory Assistance operator.

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- the Customer is given an incorrect telephone number, or
- the Customer inadvertently misdials an incorrect Directory Assistance NPA.

To receive a credit, the customer must notify the Company operator or Business Office of the problem experienced.

**8.4.2    Rates**

	Min:	Max:	
Per Number Requested	\$0.56	\$2.00	(1)

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Issued: May 22, 2009

Effective: June 22, 2009

Issued By:

Senior Manager - Regulatory Affairs  
6801 Morrison Blvd.  
Charlotte, North Carolina 28211  
**90-9096-TP-TRF**

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SECTION 11 - PRICE LIST

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11.6 Remote Call Forwarding On-Net

	<u>Non-Recurring</u>	<u>Monthly Recurring</u>
Remote Call Forwarding On-Net (per number)	\$100.00	\$25.00

11.7 Operator Services

	<u>Per Call Charges</u>
Person-to-Person	\$3.50
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Calling Card	\$0.75

11.8 Busy Line Verify and Line Interrupt Service

	<u>Per Request</u>
Busy Line Verify Service	\$0.75
Busy Line Verify and Busy Line Interrupt Service	\$1.55

11.9 Directory Assistance

Per Number Requested	\$1.99
----------------------	--------

(1)

11.10 Service Implementation

	<u>Non-Recurring</u>
Per Service Order	\$25.00

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Issued: May 22, 2009

Effective: June 22, 2009

Issued By:

Senior Manager - Regulatory Affairs  
6801 Morrison Blvd.  
Charlotte, North Carolina 28211  
**90-9096-TP-TRF**

**EXHIBIT**  
**C**

**This filing increases Local Directory Assistance rates for all customers.**



**EXHIBIT**  
**D**

**Ohio (Legacy US LEC)**

**Directory Assistance Rate Change**

While we strive to pass along fair and affordable pricing to our customers, the cost of providing services has risen. At this time, we find it necessary to make adjustments to our current Local Directory Assistance services.

Effective with invoices beginning June 22, 2009, the price for your Local Directory Assistance calls will increase to:

**Current Directory Assistance Rate: \$0.75**

**New Directory Assistance Rate: \$1.99**

If you have additional questions, please contact Customer Care at 877.340.2600.