

Via Electronic Filing



October 28, 2009

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

Re: Case No. 09-993-TP-SLF, Cox Ohio Telcom, LLC

Attention: Docketing Division

Please find attached revised pages to the Cox Ohio Telcom, LLC ("Cox") Local Exchange and Interexchange Services tariff, PUCO Tariff No. 1. Revisions submitted herewith are made to increase the residential directory assistance, per call rate.

Your assistance in this matter is greatly appreciated. Please contact me if you have questions regarding the tariff revisions.

Respectfully submitted,
Cox Ohio Telcom, LLC

A handwritten signature in cursive script that reads "Ida Bourne".

Ida Bourne
Director-Regulatory Affairs Operations
Cox Communications
404 843-5292 (V)
Ida.bourne@cox.com

cc: Robert Howley, Cox Communications

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

In the Matter of the Application of Cox Ohio Telcom, LLC)
to Public Utilities Commission of Ohio)
))
))

TRF Docket No. 90-_____
Case No. 09- 993-TP -SLF
NOTE: Unless you have reserved a Case # or are filing a Contract, leave the "Case No" fields BLANK.

Name of Registrant(s): Cox Ohio Telcom, LLC
DBA(s) of Registrant(s): Cox Communications
Address of Registrant(s): 1400 Lake Hearn Drive, Room 5EF, Atlanta, GA 30319
Company Web Address: www.cox.com/cleveland
Regulatory Contact Person(s): Robert J. Howley Phone: 860-432-2873 Fax: 401-615-1587
Regulatory Contact Person's Email Address: rob.howley@cox.com
Contact Person for Annual Report: Robert J. Howley Phone: 860-432-2873
Address (if different from above): 170 Utopia Road, Manchester, CT 06040
Consumer Contact Information: Robert Howley Phone: 860-432-2873
Address (if different from above): 170 Utopia Road, Manchester, CT 06040
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 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
Tier 1 Regulatory Treatment				
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)		
Tier 2 Regulatory Treatment				
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 <u>1-6-10</u> (Auto 30 days)	<input type="checkbox"/> ACE <u>1-6-10</u> (Auto 30 days)	<input type="checkbox"/> ACE <u>1-6-10</u> (Auto 30 days)
Add Exchanges to Certificate	<input type="checkbox"/> ATA <u>1-6-09(C)</u> (Auto 30 days)	<input type="checkbox"/> AAC <u>1-6-10(F)</u> (0 day Notice)	CLECs must attach a current CLEC Exchange Listing Form	
Abandon all Services - With Customers	<input type="checkbox"/> ABN <u>1-6-11(A)</u> (Non-Auto)	<input type="checkbox"/> ABN <u>1-6-11(A)</u> (Auto 90 day)	<input type="checkbox"/> ABN <u>1-6-11(B)</u> (Auto 14 day)	<input type="checkbox"/> ABN <u>1-6-11(B)</u> (Auto 14 day)
Abandon all Services - Without Customers		<input type="checkbox"/> ABN <u>1-6-11(A)</u> (Auto 30 days)	<input type="checkbox"/> ABN <u>1-6-11(B)</u> (Auto 14 day)	<input type="checkbox"/> ABN <u>1-6-11(B)</u> (Auto 14 day)
Change of Official Name (See below)	<input type="checkbox"/> ACN <u>1-6-14(B)</u> (Auto 30 days)	<input type="checkbox"/> ACN <u>1-6-14(B)</u> (Auto 30 days)	<input type="checkbox"/> CIO <u>1-6-14(A)</u> (0 day Notice)	<input type="checkbox"/> CIO <u>1-6-14(A)</u> (0 day Notice)
Change in Ownership (See below)	<input type="checkbox"/> ACO <u>1-6-14(B)</u> (Auto 30 days)	<input type="checkbox"/> ACO <u>1-6-14(B)</u> (Auto 30 days)	<input type="checkbox"/> CIO <u>1-6-14(A)</u> (0 day Notice)	<input type="checkbox"/> CIO <u>1-6-14(A)</u> (0 day Notice)
Merger (See below)	<input type="checkbox"/> AMT <u>1-6-14(B)</u> (Auto 30 days)	<input type="checkbox"/> AMT <u>1-6-14(B)</u> (Auto 30 days)	<input type="checkbox"/> CIO <u>1-6-14(A)</u> (0 day Notice)	<input type="checkbox"/> CIO <u>1-6-14(A)</u> (0 day Notice)
Transfer a Certificate (See below)	<input type="checkbox"/> ATC <u>1-6-14(B)</u> (Auto 30 days)	<input type="checkbox"/> ATC <u>1-6-14(B)</u> (Auto 30 days)	<input type="checkbox"/> CIO <u>1-6-14(A)</u> (0 day Notice)	<input type="checkbox"/> CIO <u>1-6-14(A)</u> (0 day Notice)
Transaction for transfer or lease of property, plant or business (See below)	<input type="checkbox"/> ATR <u>1-6-14(B)</u> (Auto 30 days)	<input type="checkbox"/> ATR <u>1-6-14(B)</u> (Auto 30 days)	<input type="checkbox"/> CIO <u>1-6-14(A)</u> (0 day Notice)	<input type="checkbox"/> CIO <u>1-6-14(A)</u> (0 day Notice)
Procedural				
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 <u>1-7-07</u> (Auto 90 day)	<input type="checkbox"/> NAG <u>1-7-07</u> (Auto 90 day)		
Request for Arbitration	<input type="checkbox"/> ARB <u>1-7-09</u> (Non-Auto)	<input type="checkbox"/> ARB <u>1-7-09</u> (Non-Auto)		
Introduce or change c-t-c service tariffs,	<input type="checkbox"/> ATA <u>1-7-14</u> (Auto 30 day)	<input type="checkbox"/> ATA <u>1-7-14</u> (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 <u>1-7-04</u> or <u>1-7-05</u> (Non-Auto)	<input type="checkbox"/> UNC <u>1-7-04</u> or <u>1-7-05</u> (Non-Auto)		
Pole attachment changes in terms and conditions and price changes.	<input type="checkbox"/> UNC <u>1-7-23(B)</u> (Non-Auto)	<input type="checkbox"/> UNC <u>1-7-05</u> (Non-Auto)		
CMRS Providers See <u>4901:1-6-15</u>	<input type="checkbox"/> RCC [Registration & Change in Operations] (0 day)		<input type="checkbox"/> NAG [Interconnection Agreement or Amendment] (Auto 90 days)	
Other* (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, Ida Bourne, 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): 10/28/2009

at (Location): 1400 Lake Hearn Drive, Atlanta, GA 30319

*(Signature and Title): Ida Bourne (Date): 10/28/2009
Director-Regulatory Affairs

- *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, Ida Bourne, 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) Ida Bourne Director-Regulatory Affairs (Date): 10/28/2009

**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
Tariff Pages Prior to Proposed Change

Cox Ohio Telcom, LLC
Case No. 09-993-TP-SLF
Issued October 28, 2009

LOCAL EXCHANGE AND INTEREXCHANGE SERVICES

CHECK SHEET

All pages of this tariff are effective as of the date shown. Original and revised pages, as named below, comprise all changes from the original tariff in effect on the date indicated.

<u>PAGE</u>	<u>REVISION</u>	<u>PAGE</u>	<u>REVISION</u>	<u>PAGE</u>	<u>REVISION</u>
Title Page	Original	26	Original	51	Original
2*	13th Revised	27	Original	52*	1st Revised
3	Original	28	Original	52.1	Original
4	Original	29	Original	53*	1st Revised
5*	1st Revised	30	Original	54*	2nd Revised
6	Original	31	Original	55*	2nd Revised
7	Original	32	Original	56*	2nd Revised
8	Original	33*	2nd Revised	57*	2nd Revised
9	Original	34	1 st Revised	58*	1st Revised
10	Original	35*	4th Revised	59*	1st Revised
11	Original	36	Original		
12	Original	37*	2nd Revised		
13	Original	38	1 st Revised		
14	Original	39	Original		
15	Original	40	Original		
16	Original	41*	1st Revised		
17	Original	42	Original		
18	Original	43	Original		
19	Original	44*	1st Revised		
20	Original	45	Original		
21	Original	46	Original		
22	Original	47	Original		
23	Original	48	6 th Revised		
24	Original	48.1	4 th Revised		
25	Original	49	Original		
		50	Original		

(*) Denotes new or revised page.

LOCAL EXCHANGE AND INTEREXCHANGE SERVICES

SECTION 3 - Service Descriptions, cont'd.

3.2 Directory Assistance

A Customer may obtain Directory Assistance in determining telephone numbers within its local calling area by calling the Directory Assistance operator.

1. Customers with multiple-line residence service shall be allowed two additional calls per month or four additional Directory Assistance listings (whichever is used first) per line. Call allowances are not applicable to business class of service.
2. A credit will be given for calls to Directory Assistance as follows:
 - The Customer experiences poor transmission or is cut-off during the call; or
 - The Customer is given an incorrect telephone number.

To obtain such a credit, the Customer must notify its Customer Service representative.

3. Charges for Directory Assistance (DA) are not applicable to calls placed from Customers whose physical, visual, mental or reading disabilities prevent them from using the telephone or the directory. The method of exempting those disabled Customers shall be via the completion of an exemption form supplied by the Company and the Company's acceptance of that form. The exemption for disabled Customers includes sent-paid calls from the Customers' local exchange service. Third number billing of DA calls to the disabled Customers' local exchange service are not exempt.
4. Charges for Directory Assistance Service are not applicable to calls placed from Hospitals.
5. Rates and Charges

Residential, per call:	\$1.25
Business, per call:	\$1.50

Exhibit B
Tariff Pages Reflecting Proposed Change

Cox Ohio Telcom, LLC
Case No. 09-993-TP-SLF
Issued: October 28, 2009

LOCAL EXCHANGE AND INTEREXCHANGE SERVICES

CHECK SHEET

All pages of this tariff are effective as of the date shown. Original and revised pages, as named below, comprise all changes from the original tariff in effect on the date indicated.

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2*	14th Revised	27	Original	52	1 st Revised
3	Original	28	Original	52.1	Original
4	Original	29	Original	53	1 st Revised
5	1 st Revised	30	Original	54	2 nd Revised
6	Original	31	Original	55	2 nd Revised
7	Original	32	Original	56	2 nd Revised
8	Original	33	2 nd Revised	57	2 nd Revised
9	Original	34	1 st Revised	58	1 st Revised
10	Original	35	4 th Revised	59	1 st Revised
11	Original	36	Original		
12	Original	37	2 nd Revised		
13	Original	38	1 st Revised		
14	Original	39*	1st Revised		
15	Original	40	Original		
16	Original	41	1 st Revised		
17	Original	42	Original		
18	Original	43	Original		
19	Original	44	1 st Revised		
20	Original	45	Original		
21	Original	46	Original		
22	Original	47	Original		
23	Original	48	6 th Revised		
24	Original	48.1	4 th Revised		
25	Original	49	Original		
		50	Original		

(*) Denotes new or revised page.

LOCAL EXCHANGE AND INTEREXCHANGE SERVICES

SECTION 3 - Service Descriptions, cont'd.

3.2 Directory Assistance

A Customer may obtain Directory Assistance in determining telephone numbers within its local calling area by calling the Directory Assistance operator.

1. Customers with multiple-line residence service shall be allowed two additional calls per month or four additional Directory Assistance listings (whichever is used first) per line. Call allowances are not applicable to business class of service.

2. A credit will be given for calls to Directory Assistance as follows:

- The Customer experiences poor transmission or is cut-off during the call; or
- The Customer is given an incorrect telephone number.

To obtain such a credit, the Customer must notify its Customer Service representative.

3. Charges for Directory Assistance (DA) are not applicable to calls placed from Customers whose physical, visual, mental or reading disabilities prevent them from using the telephone or the directory. The method of exempting those disabled Customers shall be via the completion of an exemption form supplied by the Company and the Company's acceptance of that form. The exemption for disabled Customers includes sent-paid calls from the Customers' local exchange service. Third number billing of DA calls to the disabled Customers' local exchange service are not exempt.

4. Charges for Directory Assistance Service are not applicable to calls placed from Hospitals.

5. Rates and Charges

Residential, per call:	\$1.99
Business, per call:	\$1.50

(I)

Exhibit C
Description of Change

Cox Ohio Telcom, LLC
Case No. 09-993-TP-SLF
Issued: October 28, 2009

With this filing Cox Ohio Telcom, LLC revises its Local Exchange and Interexchange Services tariff, PUCO Tariff No. 1 to (1) add rate maximums, and (2) delete duplicate rates contained in Section 8, Price List. Tariff pages revised with this filing are as follows:

Page Number	Description
2	Revise Check Sheet
39	Increase residential directory assistance, per call rate

CUSTOMER NOTICE AFFIDAVIT

STATE OF: Georgia

COUNTY OF: Dekalb

AFFIDAVIT

I, Ida Bourne, am an authorized agent of the applicant corporation, Cox Ohio Telcom, LLC, and am authorized to make this statement on its behalf. I attest that customer notices accompanying this affidavit were sent to affected customers through customer bill statements on September 14, 2009, in accordance with Rule 4901:1-6-16, Ohio Administrative Code. I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 28, 2009, 1400 Lake Hearn Drive, 5EF, Atlanta, GA 30319
(Date) (Location)

/s/ Ida Bourne October 28, 2009
Ida Bourne, Director Regulatory Affairs (Date)

Subscribed and sworn to before me this Oct 28, 2009
(Date)

Mary Jane Cagle
Notary Public
My Commission Expires: 4-24-12





This foregoing document was electronically filed with the Public Utilities

Commission of Ohio Docketing Information System on

10/28/2009 10:56:28 AM

in

Case No(s). 09-0993-TP-SLF

Summary: Application Directory Assistance Rate Increase-Residential electronically filed by Mrs. Ida M Bourne on behalf of Bourne, Ida M