

FILE **deltacom**™

7037 Old Madison Pike
Suite 400
Huntsville, AL 35806

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PUCO

September 26, 2006

Via Overnight Delivery

Ms. Renee Jenkins, Commission Secretary
Public Utilities Commission of Ohio
180 East Broad Street
Columbus, Ohio 43215

90-9331-TP-TRF

Re: ITC^DeltaCom, Inc.'s Long Distance - Promotional Letter

Dear Mr. Bourland:

Enclosed for filing with the Commission are an original and three (3) copies of this letter to introduce the following ITC^DeltaCom, Inc. promotion. This promotion is effective September 27, 2006 and available through December 26, 2007.

LD Rewards

LD Rewards Switched Long Distance

LD Rewards Switched Long Distance is a direct dialed outbound long distance and toll free service designed for existing ITC^DeltaCom Business Customers who are re-termining their long distance services. Customers who commit to a minimum monthly volume level will receive rates as specified below. The volume level commitment is based on the Customer's total usage charges during a monthly billing period. Eligible usage includes Customer's outbound and toll free domestic calls.

Per minute intrastate and interstate rates are set forth below and apply exclusively to outbound and toll free domestic traffic. International, Directory Assistance and Operator Service calls are not eligible to receive the rates specified below.

A minimum one-year term agreement is required for this service. No additional discounts will be applied to the rates below.

No other charges, including taxes and the monthly fee, if applicable, will be eligible in attaining the commitment. If the total monthly usage does not meet the minimum volume commitment level, the Customer will be billed an amount that will meet the minimum volume commitment level. The amount will appear as a separate line item on the customer's bill and will be identified as "Volume Level Shortfall Amount." Taxes and surcharges apply to the Volume Level Shortfall Amount. Customers with multiple locations and/or multiple accounts in a group account will be evaluated on an individual account basis.

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 JB Date Processed 9-27-06

www.deltacom.com
1.800.239.3000

Ms. Renee Jenkins, Commission Secretary
Public Utilities Commission of Ohio
September 26, 2006
Page Two

LD Rewards Switched Long Distance, Continued

Discontinuance provisions apply as set forth in the ITC^DeltaCom Communications, Inc. Ohio Long Distance PUCO Tariff No. 1, except that, in place of the Annual Usage Commitment Level in the Discontinuance Charge calculation, Customers who sign a term agreement will be charged an amount equal to the monthly volume level commitment amount multiplied by the number of months remaining in the term, on a per-location basis. This discontinuance penalty applies at the time of cancellation regardless of amounts paid in excess of previous months' volume level commitment. In addition, the Company will seek repayment of all monthly and non-recurring fees waived through the date of cancellation. In the event Customer is unable to continue to meet the percentage usage requirements for this product and service is terminated by the Company, no discontinuance charges will be assessed. If customer chooses to transfer service to an alternate product and service is subsequently terminated, Discontinuance Charges will apply under the new product.

Calls are billed in six (6) second increments following an initial billing period of eighteen (18) seconds. International service is offered in conjunction with intrastate and interstate service.

LD Rewards Long Distance – Switched Rates

	Monthly Volume*	Interstate Per Minute Rate	Intrastate Per Minute Rate
Option A**	\$10.00	\$0.055	\$0.065
Option B**	\$15.00	\$0.050	\$0.060
Option C**	\$25.00	\$0.045	\$0.055
Option D**	\$50.00	\$0.039	\$0.049
Travel Card***	N/A	\$0.129	\$0.129

- * Volume does not include any surcharges, taxes or other similar fees.
- ** Rates apply to outbound and toll free domestic calls.
- *** A surcharge will not apply.

	Monthly Recurring Charge
Toll Free Number, per number:	\$3.00

Please acknowledge receipt of this letter by date-stamping the enclosed letter labeled "return receipt" and returning it to me in the enclosed self-addressed, stamped envelope after it is accepted for filing with the Commission.

Should you have any questions regarding this filing, please contact me at 256-382-7090. Thank you for your assistance in this matter.

Sincerely,



Traci Tidmore
Regulatory Manager

Enclosures

deltacom™

7037 Old Madison Pike ▶ Huntsville, AL 35806 ▶

DATE:

09/27/06

TIME:

11:15 A.M. CST

SENT TO:

Name: Lisa Stewart - Docket Filing

Fax Number: 614.466.0313

SENT FROM:

Name: Traci Tidmore

Phone Number: (256) 382-7090

Fax Number: (256) 382-3936

☐ Urgent ☒ For Review ☐ Please Comment ☐ Please Reply ☐ Please Date & Sign

Number of Pages (including this cover sheet): 2

--- NOTICE ---

This facsimile transmittal is intended only for the use of the individual or entity to which it is addressed and may contain confidential information belonging to the sender which is protected legally by the attorney-client privilege and/or work product doctrine. If you are not the intended recipient or the employee or agent responsible for delivering the transmission, you are hereby notified that any dissemination, copying or use of this transmission is strictly prohibited. If you have received this transmission in error, please immediately notify the sender by telephone to arrange for return of the transmission.

COMMENTS:

Lisa Stewart,

Attached is the Public Utilities Commission of Ohio Telecommunications Application Form. This form is in reference to the Promotional Letter dated September 26, 2006, sent from ITC^DeltaCom Communications, Inc. to the Commission in order to introduce a market trial promotion for LD Rewards. Thank you for explaining the filing process for Ohio and for your assistance regarding the form.

Thanks, Traci Tidmore
Regulatory Manager

If you have any trouble receiving this fax transmission, please call Traci Tidmore at 256-382-7090. Thank you.

The Public Utilities Commission of Ohio
TELECOMMUNICATIONS APPLICATION FORM
 (Effective: 10/01/2004)

(Pursuant to Case Nos. 99-998-TP-COI and 99-563-TP-COI)

In the Matter of the Application of
ITC*DeltaCom Communications, Inc.
 To file a Market Trial Promotion

)
) Case No. 04 - _____ - TP - _____
)

Name of Registrant(s) ITC*DeltaCom Communications, Inc.
 DBA(s) of Registrant(s) ITC*DeltaCom
 Address of Registrant(s) 7037 Old Madison Pike, Ste 400, Huntsville, Alabama 35806
 Company Web Address www.deltacom.com
 Regulatory Contact Person(s) Traci Tidmore Phone 256-382-7090 Fax 256-382-3936
 Regulatory Contact Person's Email Address: traci.tidmore@deltacom.com
 Contact Person for Annual Report: Jean Houck Phone: 256-382-2230
 Consumer Contact Information: Jean Houck Phone: 256-382-2230
 Date: September 27, 2006 TRF Docket No. 90 - CT-TRF

Motion for protective order included with filing ☐ Yes ☒ No

Motion for waiver(s) filed affecting this case? ☐ Yes ☒ No (Note: waiver(s) tolls any automatic timeframe)

Company Type (check all applicable): ☒ CTS (IXC) ☐ ILEC ☐ CLEC ☐ CMRS ☐ AOS
☐ Other (explain) _____

NOTE: This form must accompany all applications filed by telecommunication service providers subject to the Commission's rules promulgated in Case No. 99-998-TP-COI, as well as by ILECs filing an ARB or NAG case pursuant to the guidelines established in Case No. 96-463-TP-UNC. *It is preferable NOT to combine different types of filings, but if you do so, you must file under the process with the longest applicable review period.*

I. Please indicate the reason for submitting this form (check one)

- ☐ 1 (AAC) Application to Amend Certificate by a CLEC to modify Serving Area (0-day notice, 7 copies)
- ☐ 2 (ABN) Abandonment of all Services
 - ☐ a. CLEC (90-day approval, 10 copies) ☐ b. CTS (14-day approval, 10 copies) ☐ c. ILEC (NOT automatic, 10 copies)
- ☐ 3 (ACE) New Operating Authority for providers other than CMRS (30-day approval, 7 copies); for CMRS, see item No 15 on this page.
 - ☐ a. Switched Local ☐ b. Non-switched local ☐ c. CTS ☐ d. Local and CTS ☐ e. Other (explain) _____
- ☐ 4 (ACO) LEC Application to Change Ownership (30-day approval, 10 copies)
- ☐ 5 (ACN) LEC Application to Change Name (30-day approval, 10 copies)
- ☐ 6 (ABC) Carrier-to-Carrier Contract Amendment to an agreement approved in a NAG or ARB case (30-day approval, 7 copies)
 NOTE: see item 25 (CTR) on page two of this form for all other contract filings.
- ☐ 7 (AMT) LEC Merger (30-day approval, 10 copies)
- ☐ 8 (ARB) Application for Arbitration (see 96-463-TP-COI for applicable process, 10 copies)
- ☐ 9 (ATA) Application for Tariff Amendment for Tier 1 Services, Application to Reclassify Service Among Tiers, or Change to Non-Tier Service
 - ☐ a. Tier 1 (and Carrier-to-Carrier tariff filings as set forth in 95-845-TP-COI)
 - ☐ i. Pre-filing submittal (30-day pre-filing submittal with Staff and OCC, Do Not Docket, 4 copies)
 - ☐ ii. New End User Service which has been preceded by a 30-day pre-filing submittal with Staff for all submittals and also with OCC for Tier 1 residential services (0-day filing, 10 copies)
 - ☐ iii. New End User Service (NOT preceded by a 30-day filing submittal, 30-day approval, 10 copies)
 - ☐ iv. New Carrier-to-Carrier Service which has been preceded by a 30-day pre-filing with Staff (0-day filing, 10 copies)
 - ☐ v. Change in Terms and Conditions, textual revision, correction of error, etc. (30-day approval, 10 copies)
 - ☐ vi. Grandfather service (30-day approval, 10 copies)
 - ☐ vii. Initial Carrier-to-Carrier Services Tariff subsequent to ACE approval (60-day approval, 10 copies)
 - ☐ viii. Withdrawal of Tier 1 service must be filed as an "ATW", not an "ATA" - see item 12, below
 - ☐ b. Reclassification of Service Among Tiers (NOT automatic, 10 copies)
 - ☐ c. Textual revision with no effect on rates for non-specific or non-tier service (30-day approval, 10 copies)
- ☐ 10 (ATC) Application to Transfer Certificate (30-day approval, 7 copies)
- ☐ 11 (ATR) LEC Application to Conduct a Transaction Between Utilities (30-day approval, 10 copies)
- ☐ 12 (ATW) Application to Withdraw a Tier 1 Service
 - ☐ a. CLEC (60-day approval, 10 copies) ☐ b. ILEC (NOT automatic, 10 copies)
- ☐ 13 (CIO) Application for Change in Operations by Non-LEC Providers (0-day notice, 7 copies)
- ☐ 14 (NAG) Negotiated Interconnection Agreement Between Carriers (0-day effective, 90-day approval, 8 copies)
- ☐ 15 (RCC) For CMRS providers only to Register or to Notify of a Change in Operations (0-day notice, 7 copies)
- ☐ 16 (SLF) Self-complaint Application
 - ☐ a. CLEC only - Tier 1 (60-day automatic, 10 copies)
 - ☐ b. Introduce or increase maximum price range for Non-Specific Service Charge (60-day approval, 10 copies)
- ☐ 17 (UNC) Unclassified (explain) _____ (NOT automatic, 15 copies)

- ☐ 18 (2/TA) Tariff Notification Involving only Tier 2 Services
 NOTE: Notifications do not require or imply Commission Approval.
☐ a. New End User Service (0-day notice, 10 copies)
☐ b. Change in Terms and Conditions, textual revision, correction of error, etc. (0-day notice, 10 copies)
☐ c. Withdrawal of service (0-day notice, 10 copies)
- ☐ 19 Other (explain) _____ (NOT automatic, 15 copies)

THE FOLLOWING ARE TRF FILINGS ONLY, NOT NEW CASES (0-day notice, 3 copies)

- ☐ 20 Introduction or Extension of Promotional Offering
- ☐ 21 New Price List Rate for Existing Service
☐ a. Tier 1 ☐ b. Tier 2
- ☐ 22 Designation of Registrant's Process Agent(s)
- ☐ 23 Update to Registrant's Maps
- ☐ 24 Annual Tariff Option For Tier 2 Services - indicate which option you intend to adopt to maintain the tariff. NOTE: changing options is only permitted once per calendar year.
☐ Paper Tariff ☐ Electronic Tariff. If electronic, provide the tariff's web address: _____

THE FOLLOWING ARE CTR FILINGS ONLY, NOT NEW CASES (0-day notice, 7 copies)

- ☐ 25 Application to establish, revise, or cancel an end-user contract (NOTE: see item 6 on page 1 of this form for carrier-to-carrier contract amendments)
 CTR Docket No. _____ - TP - CTR (Use same CTR number throughout calendar year)

II. Please indicate which of the following exhibits have been filed. The numbers (corresponding to the list on page (1) and above) indicate, at a minimum, the types of cases in which the exhibit is required:

<input type="checkbox"/>	[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.
<input type="checkbox"/>	[3]	Completed Service Requirements Form
<input type="checkbox"/>	[3, 9(vii)]	A copy of registrant's proposed tariffs. (Carrier-to-Carrier resale tariff also required if facilities-based)
<input type="checkbox"/>	[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.
<input type="checkbox"/>	[3]	Brief description of service(s) proposed.
<input type="checkbox"/>	[3a-b, 3d]	Explanation of whether applicant intends to provide <input type="checkbox"/> resale services, <input type="checkbox"/> facilities-based services, or <input type="checkbox"/> both resale and facilities-based services
<input type="checkbox"/>	[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.
<input type="checkbox"/>	[3a-b, 3d]	Explanation of how the proposed services in the proposed market area are in the public interest.
<input type="checkbox"/>	[3a-b, 3d]	Description of the proposed market area
<input type="checkbox"/>	[3a-b, 3d]	Description of the class of customers (e.g., residence, business) that the applicant intends to serve.
<input type="checkbox"/>	[3a-b, 3d]	Documentation attesting to the applicant's financial viability, including the following: 1) An executive Summary describing the applicant's current financial condition, liquidity, and capital resources Describe internally generated sources of cash and external funds available to support the applicant's operations that are the subject of this certification application 2) 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 3) Documentation to support the applicant's cash on funding sources.
<input type="checkbox"/>	[3a-d]	Documentation attesting to the applicant's technical and managerial expertise relative to the proposed service offering(s) and proposed service area.
<input type="checkbox"/>	[3a-d]	Documentation indicating the applicant's corporate structure and ownership.
<input type="checkbox"/>	[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.
<input type="checkbox"/>	[3a-b, 3d]	Verification that the applicant will maintain local telephony records separate and apart from any other accounting records in accordance with the CAAP.
<input type="checkbox"/>	[3a-b, 3d]	Verification of compliance with any affiliate transaction requirements
<input type="checkbox"/>	[3a-b, 3d]	Explanation as to whether rates are derived through (check all applicable): <input type="checkbox"/> interconnection agreement, <input type="checkbox"/> retail tariffs, or <input type="checkbox"/> resale tariffs.
<input type="checkbox"/>	[1, 3a-b, 3d]	Explanation as to which service areas company currently has an approved interconnection or resale agreement.
<input type="checkbox"/>	[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
<input type="checkbox"/>	[3a, 3b, 3d, 9a, (i-iii)]	Tariff sheet(s) listing the services and associated charges that must be paid prior to customer receiving dial tone (if applicable).
<input type="checkbox"/>	[3a-b, 3d, 8]	Letters requesting negotiation pursuant to Sections 231 and 252 of the Telecommunications Act of 1996 and a proposed timeline for construction, interconnection, and offering of services to end users.
<input type="checkbox"/>	[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 ownership cases, the transferee's good standing must be established.
<input type="checkbox"/>	[3-4.7, 10-11, 13]	List of names, addresses, and phone numbers of officers and directors, or partners
<input type="checkbox"/>	[3]	A sample copy of the customer bill and disconnection notice the applicant plans to utilize.
<input type="checkbox"/>	[1, 4.9, 10-13, 16-21]	Copy of superseded tariff sheet(s) & price list(s), if applicable, marked as Exhibit A.

<input type="checkbox"/>	{1,4,9,10-13,16-21}	Copy of revised tariff sheets & price lists, marked as Exhibit B.
<input type="checkbox"/>	[3]	Provide a copy of any customer application form required in order to establish residential service, if applicable.
<input checked="" type="checkbox"/>	{1-2,4-7,9,12-13,16,18-23,25}	Description of and rationale for proposed tariff changes, including a complete description of the service(s) proposed or affected. Specify for each service affected whether it is <input checked="" type="checkbox"/> business; <input type="checkbox"/> residence; or <input type="checkbox"/> both. Also indicate whether it is a <input checked="" type="checkbox"/> switched or <input type="checkbox"/> dedicated service. Include this information in either the cover letter or Exhibit C.
<input type="checkbox"/>	{1,2,4,9a(v-vi), 5,10,16,18(b-c), 21}	Specify which notice procedure has been/will be utilized: <input type="checkbox"/> direct mail, <input type="checkbox"/> bill insert, <input type="checkbox"/> bill notation or <input type="checkbox"/> electronic mail. NOTE: <input type="checkbox"/> Tier 1 price list increases must be within an approved range of rates. <input type="checkbox"/> SLF Filings - Do NOT send customer notice until it has been reviewed and approved by Commission Staff
<input type="checkbox"/>	{2,4-5,9a(v), 9b, 10,12-13,16, 18(b-c),20-21}	Copy of real time notice which has been/will be provided to customers. NOTE: SLF Filings - Do NOT send customer notice until it has been reviewed and approved by Commission Staff
<input type="checkbox"/>	{1,2,5,9a(v),11-13, 18, 21(increase only)}	Affidavit attesting that customer notice has been provided.
<input type="checkbox"/>	[2,12]	Copy of Notice which has been provided to ILEC(s).
<input type="checkbox"/>	[2,12]	Listing of Assigned (NPA) NXX's where in the LECs (NPA) NXX's would be reassigned.
<input type="checkbox"/>	[2,4,10,12-13,]	List of Ohio exchanges specifically involved or affected.
<input type="checkbox"/>	[14]	The interconnection agreement adopted by negotiation or mediation.
<input type="checkbox"/>	[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.
<input type="checkbox"/>	[15]	Exhibits must include company name, address, contact person, service description, and evidence of registration with the Ohio Secretary of State.
<input type="checkbox"/>	[24]	Affidavit that total price of contract exceeds total cost of all regulated services.
<input type="checkbox"/>	[5,13]	New title sheet with proposed new company name.
<input type="checkbox"/>	[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).
<input type="checkbox"/>	{1,3a-b,3d,7, 10,13, 23}	Maps depicting the proposed serving and calling areas of the applicant. If Mirroring Large ILEC exchanges for both serving area and local calling areas: - <i>Serving area</i> 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 ILEC/CI-LEC territory, and listing the involved exchanges. - <i>Local calling areas</i> 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): - <i>Serving Area</i> must be clearly reflected on an Ohio map attached to the tariffs, and textually described in tariffs by listing the involved exchanges. - <i>Local Calling Areas</i> 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.
<input type="checkbox"/>		Other information requested by the Commission staff.
<input type="checkbox"/>	[3]	Initial certification that includes Tier 2 Services, indicate which option you intend to adopt to maintain the tariff. <input type="checkbox"/> Paper Tariff <input type="checkbox"/> Electronic Tariff - If electronic, provide the web address for the tariff.

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:

- ☒ Sales tax
- ☒ Minimum Telephone Service Standards (MTSS)
- ☒ Surcharges

MANDATORY REQUIREMENTS FOR ALL BASIC LOCAL EXCHANGE PROVIDERS:

- ☒ 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) services]
- ☐ 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:

Traci Tidmore, Regulatory Manager, ITC^DeltaCom Communications, Inc., 7037 Old Madison Pike, Ste 400, Huntsville, Alabama 35806 (800) 239-3000

Jean Houck, Senior Manager-Regulatory Affairs, ITC^DeltaCom Communications, Inc., 7037 Old Madison Pike, Ste 400, Huntsville, Alabama 35806 (800) 239-3000

Dennis Anthony Mastando, Jr., Regulatory Attorney, ITC^DeltaCom Communications, Inc., 7037 Old Madison Pike, Ste 400, Huntsville, Alabama 35806 (800) 239-3000

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:

Tina Ellis, Account Services Project Coordinator, ITC^DeltaCom Communications, Inc., 8830 US Hwy 231, Arac, Alabama 35016 (800) 239-3000

Traci Tidmore, Regulatory Manager, ITC^DeltaCom Communications, Inc., 7037 Old Madison Pike, Ste 400, Huntsville, Alabama 35806 (800) 239-3000

Jean Houck, Senior Manager-Regulatory Affairs, ITC^DeltaCom Communications, Inc., 7037 Old Madison Pike, Ste 400, Huntsville, Alabama 35806 (800) 239-3000

Dennis Anthony Mastando, Jr., Regulatory Attorney, ITC^DeltaCom Communications, Inc., 7037 Old Madison Pike, Ste 400, Huntsville, Alabama 35806 (800) 239-3000

NOTE: 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: ☐)

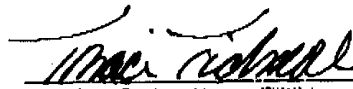
Business Telecom, Inc. d/b/a BTI Telecommunications Services, Inc. Certification No. 90-5193

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

I am an Authorized Representative of the applicant corporation, ITC*DeltaCom Communications, Inc., and am authorized
(Name of Company)
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.

Executed on 09/27/06 at ITC*DeltaCom Communications, Inc., 7037 Old Madison Pike, Ste 400,
(Date) (Location)
Huntsville, AL 35806

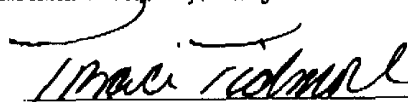


Traci Tidmore, Regulatory Manager, ITC*DeltaCom Communications, Inc.
September 27, 2006

** 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, Traci Tidmore, Regulatory Manager for ITC*DeltaCom Communications, Inc. verify that I have utilized, verbatim, the Commission's Telecommunications Application Form 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.



Traci Tidmore, Regulatory Manager, ITC*DeltaCom Communications, Inc.
September 27, 2006

**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 (or to the Telecommunications Division Chief if a pre-filing submital)
180 East Broad Street, Columbus, OH 43215-3793