

July 1, 2013

Via E-Filing



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

Re: Case No. 90-6226-TP-TRF, 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 residential flat rate service rate and are filed with a zero (0) day notice period.

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

By: Ida Bourne

Ida Bourne
Cox Communication
Regulatory Affairs
404 843-5292 (V)

cc: Robert Howley, Cox Communications

Enclosures:

- Telecommunications Application Form for Routine Proceedings
- Exhibit A – Current Tariff Pages
- Exhibit B – Proposed Tariff Pages
- Exhibit C – Description of Change
- Customer Notice Affidavit

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. 90-6226-TP-TRF

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 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 checked="" 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)
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 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)		
CMRS Providers 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)	
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) 07-01-2013 at (Location) 1400 Lake Hearn Drive, Atlanta, GA 30319

*(Signature and Title)

Director-Regulatory Affairs

(Date) 07-01-2013

- *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, _____
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)

Director-Regulatory Affairs

(Date) 07-01-2013

*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. 90-6226-TP-TRF

Basic Local Exchange Service

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	1 st Revised	26	1 st Revised		
2*	23 rd Revised	27	1 st Revised		
3	1 st Revised	28	1 st Revised		
4	1 st Revised	29	1 st Revised		
5	2 nd Revised	30	1 st Revised		
6	1 st Revised	31	1 st Revised		
7	1 st Revised	32*	2 nd Revised		
8	1 st Revised	33	4 th Revised		
9	1 st Revised	34	4 th Revised		
10	1 st Revised				
11	1 st Revised				
12	1 st Revised				
13	1 st Revised				
14	1 st Revised				
15	1 st Revised				
16	1 st Revised				
17	1 st Revised				
18	1 st Revised				
19	1 st Revised				
20	1 st Revised				
21	1 st Revised				
22	1 st Revised				
23	1 st Revised				
24	1 st Revised				
25	1 st Revised				

(*) Denotes new or revised page.

Basic Local Exchange Service

SECTION 3 - Service Descriptions, cont'd.

3.1 Basic Basic Local Exchange Service, cont'd.

3.1.2 Local Line, cont'd.

2. Local Line Rates and Charges-Business

a. Business Non-Recurring Charges

	Maximum	Current
Line Connection Charge ¹	\$43.00	\$39.99
Line Move/Add/Change	\$23.00	\$19.95
Account Changes, per billing record change	\$11.50	\$9.95
Line Restoral Charge, per line ²	\$23.00	\$20.00
Local Presubscribed Interexchange Carrier Change Charge ³		
- Processed electronically, per change request	N/A	\$1.25
- Processed manually, per change request	N/A	\$5.50

b. Business Monthly Recurring Charges

Business Customers may select either Flat Rate or Message Rate Service. The term "Flat Rate" denotes business service where, for a stated monthly rate, unlimited calling is allowed to all other Basic Local Exchange Service lines in the local calling area in which it is furnished. The term "Message Rate Service" denotes business service for which charges are recorded on a per call (message) usage.

	Maximum	Current
<i>Flat Rate Business Line</i>	\$30.00	\$26.95 ⁴
Message Rate Business Line	\$9.15	\$6.15 ⁴

(M) Material previously appearing on this page has been moved to 1st Revised Page 32.

¹ The initial Connection Charge for commercial service may be waived in competitive situations. Other charges may apply for inside wire repair and/or additional jack installation.

² If service is temporarily interrupted for non-payment and payment is not received within 10 days following the interruption, the Company reserves the right to discontinue service. If service is discontinued and subsequently re-established (reconnected), Telephone Reconnect charges apply.

³ When a customer switches both the customer's inerLATA presubscribed interexchange carrier* and local presubscriber interexchange carrier at the same time, Cox shall waive one-half of the applicable local presubscribed interexchange carrier change charge.

* Not regulated under this tariff.

⁴ A monthly Telecom Relay Surcharge of \$0.03 per line will be assessed in addition to the Local Flat Rate and Message Rate Monthly Business line charges.

Exhibit B
Tariff Pages Reflecting Proposed Change

Cox Ohio Telcom, LLC
Case No. 90-6226-TP-TRF

Basic Local Exchange Service

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	1 st Revised	26	1 st Revised		
2*	24th Revised	27	1 st Revised		
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6	1 st Revised	31	1 st Revised		
7	1 st Revised	32	2 nd Revised		
8	1 st Revised	33*	5th Revised		
9	1 st Revised	34	4 th Revised		
10	1 st Revised				
11	1 st Revised				
12	1 st Revised				
13	1 st Revised				
14	1 st Revised				
15	1 st Revised				
16	1 st Revised				
17	1 st Revised				
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22	1 st Revised				
23	1 st Revised				
24	1 st Revised				
25	1 st Revised				

(*) Denotes new or revised page.

CUSTOMER NOTICE AFFIDAVIT

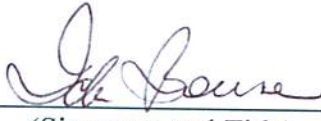
STATE OF: Georgia

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 May 1, 2013, 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 July 1 2013, 1400 Lake Hearn Drive, 5EF, Atlanta, GA 30319
(Date) (Location)

/s/  July 1, 2013
(Signature and Title) (Date)

Subscribed and sworn to before me this 1st day of July, 2013
(Date)



Notary Public

My Commission Expires: ~~4-18-1~~ 4-19-16
njc



This foregoing document was electronically filed with the Public Utilities

Commission of Ohio Docketing Information System on

7/1/2013 12:31:36 PM

in

Case No(s). 90-6226-CT-TRF

Summary: Application Increase Business Flat Rate Line rate electronically filed by Mrs. Ida M Bourne on behalf of Bourne, Ida M