

June 10, 2015

Public Utilities Commission of Ohio 180 E. Broad Street Columbus, Ohio 43215

RE: Case No. 15-1115-TP-COI

Telrite Corporation d/b/a Life Wireless – FCC Form 481

Dear Staff:

Pursuant to Case No. 13-173-TP-UNC approving Telrite Corporation d/b/a Life Wireless (Telrite) as an Eligible Telecommunications Provider, the Public Utilities Commission of Ohio designated Telrite an Eligible Telecommunications Carrier ("ETC") for the limited purpose of providing Lifeline services in the state of Ohio.

In compliance with FCC and Ohio Public Utilities Commission ETC annual reporting requirements, Telrite Corporation is required to file a copy of the FCC Annual Report (Form 481) pertaining to Ohio operations with the Ohio Commission.

Please do not hesitate to contact me if you have questions or concerns at 407-260-1011 or <a href="mailto:regulatory@csilongwood.com">regulatory@csilongwood.com</a>.

Respectfully submitted,

Mark Lammert Attorney-in-Fact

Telrite Corporation d/b/a Life Wireless

FCC Foi	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 306 July 2013	60-0986/OMB Control No. 3060-0819
<010>	Study Area Code	309018		
<015>	Study Area Name	Telrite Corporation		
<020>	Program Year	2016		
<030>	Contact Name: Person USAC should contact with questions about this data	Mark Lammert		
<035>	Contact Telephone Number: Number of the person identified in data line <030>	4072601011 ext.		
<039>	Contact Email Address: Email of the person identified in data line <030>	regulatory@csilongw	ood.com	
ANNUA	AL REPORTING FOR ALL CARRIERS			54.313 54.422 Completion Required Required (check box when complete)
<100>	Service Quality Improvement Reporting		(complete attached worksheet)	(Check box When Complete)
<200>	Outage Reporting (voice)		(complete attached worksheet)	1
<210>	✓ < check box if no	outages to report		111111
<300>	Unfulfilled Service Requests (voice)			22222
<310>	Detail on Attempts (voice)			
			(attach descriptive	document)
<320>	Unfulfilled Service Requests (broadband)			
				42222
<330>	Detail on Attempts (broadband)		(attach descriptive	document)
<400>	Number of Complaints per 1,000 customers (voice)			
<410>	Fixed			
<420>	Mobile 0.12951			
<430> <440>	Number of Complaints per 1,000 customers (broadb	and)		
<450>	Mobile			
<500>	Service Quality Standards & Consumer Protection Ru Telrite_FCC Form 481_Section 500_Service Qual		(check to indicate certification)	
<510>			(attached descriptive document)	<b>✓</b>
<600>	Functionality in Emergency Situations		(check to indicate certification)	
	Telrite_FCC Form 481_Section 600_Emergency Fu	inctionality.pdf	]	
			(attached descriptive document)	
<610>				
<700>	Company Price Offerings (voice)		(complete attached worksheet)	111111
<710>	Company Price Offerings (broadband)		(complete attached worksheet)	
	Operating Companies and Affiliates		(complete attached worksheet)	
	Tribal Land Offerings (Y/N)?  Voice Services Rate Comparability Certification		es, complete attached worksheet)	
<1010>			(attach descriptive document)	
<1100>	Certify whether terrestrial backhaul options exist (Ye	es or No) OO	(if not, check to indicate certification)	
<1110>	Terms and Condition for Lifeline Customers		(complete attached worksheet)	
\120U>	Price Cap Carriers, Proceed to Price Cap Additional D	Ocumentation Works	(complete attached worksheet)	277777
	Including Rate-of-Return Carriers affiliated with Price			
<2000>			(check to indicate certification)	111.111
<2005>	Rate of Return Carriers Proceed to BOR Addising-15	Occumentation Mode	(complete attached worksheet)	11 11 11 11 11
<3000>	Rate of Return Carriers, Proceed to <u>ROR Additional I</u>	Jocumentation Works	neet (check to indicate certification)	
<3005>			(complete attached worksheet)	111111

	ervice Quality Improvement Reporting Illection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	309018		
<015>	Study Area Name	Telrite Corporatio	n	
<020>	Program Year	2016		
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert		
<035>	Contact Telephone Number - Number of person identified in data line <030>	4072601011 ext.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilong	gwood.com	
<110>	Has your company received its ETC certification from the FCC?  If your answer to Line <110> is yes, do you have an existing \$54.202(a) "5 year plan" filed with the FCC?	(yes / no )	00	
<112>	If your answer to Line <112- is yes, then you are required to file a progress report, on line <112- delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.  Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your of CETC which only receives frozen support, your progress report is only required to address voice telephony service.	ompany is a		
	Please select the appropriate responses below (Yes, No, Not Applicable) to confit that the attached document(s), on line 112, contains a progress report on its five service quality improvement plan pursuant to \$54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	-year		Name of Attached Document
<113>	Maps detailing progress towards meeting plan targets			7
<114>	Report how much universal service (USF) support was received			
<115>	How much (USF) was used to improve service quality and how support was used to impro	ve service quality		<b>i</b>
<116>	How much (USF) was used to improve service coverage and how support was used to imp			┪
<117>	How much (USF) was used to improve service capacity and how support was used to impr			┥
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.			<u> </u>

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	309018
<015>	Study Area Name	Telrite Corporation
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert
<035>	Contact Telephone Number - Number of person identified in data line <030>	4072601011 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilongwood.com

0>	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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DOLL THE REAL PROPERTY.	ice Offerings including Voice Rate Data llection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	309018	
<015>	Study Area Name	Telrite Corporation	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4072601011 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilongwood.com	

<701>	Residential Local Service Charge Effective Date	1/1/2015			
<702>	Single State-wide Residential Local Service Charge				
				HANGE TO SERVICE WAY IN A MEDICAL PLANT OF SERVICE AND A S	
<703>	<a1> <a2> <a3></a3></a2></a1>	<b1> <b2></b2></b1>	<b3></b3>	<b4></b4>	<b55< td=""></b55<>

<a1></a1>	<a2> Exchange (ILEC)</a2>	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fee
		-						<u></u>
		1						
		-						

(710) Broadband Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	309018
<015>	Study Area Name	Telrite Corporation
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert
<035>	Contact Telephone Number - Number of person identified in data line <030>	4072601011 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilongwood.com

<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<∞	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select
							1977	

	erating Companies lection Form				FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		309018		
<015>	Study Area Name		Telrite Corpo	ration	
<020>	Program Year		2016		
<030>	Contact Name - Person	USAC should contact regarding this data	Mark Lammert		
<035>	Contact Telephone Nun	nber - Number of person identified in data line <030>	4072601011 ex	t.	
<039>	Contact Email Address	Email Address of person identified in data line <030>	regulatory@cs	ilongwood.com	
<810>	Reporting Carrier	Telrite Corporation d/b/a Life Wireless			
<811>	Holding Company	Not Applicable			
<812>	Operating Company	Life Wireless Holdings, LLC			
<813>		(a1)		<a2></a2>	<a3></a3>
		Affiliates		SAC	Doing Business As Company or Brand Designation
-					
-					
-					
-					
-					
-					

(900) Tribal Lands Reporting Data Collection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	309018	
<015>	Study Area Name	Telrite Corporation	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert	
<035>	Contact Telephone Number - Number of person identified in data line <03	30> 4072601011 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <0:	30> regulatory@csilongwood.com	
<910>	Tribal Land(s) on which ETC Serves		
<920>	Tribal Government Engagement Obligation	Name	of Attached Document
If your	company serves Tribal lands, please select (Yes,No, NA) for each these boxes		
to confi	rm the status described on the attached document(s), on line 920,		
demons	trates coordination with the Tribal government pursuant to	Select	
§ 54.31	3(a)(9) includes:	Yes or No or Not Applicable	
<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.	Not Applicable	
<922>	Feasibility and sustainability planning;		
<923>	Marketing services in a culturally sensitive manner;		
<924>	Compliance with Rights of way processes		
<925>	Compliance with Land Use permitting requirements		
<926>	Compliance with Facilities Siting rules		
<927>	Compliance with Environmental Review processes		
<928>	Compliance with Cultural Preservation review processes		

(1100) No Terrestrial Backhaul Reporting Data Collection Form			FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	309018	
<015>	Study Area Name	Telrite Corporation	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4072601011 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilongwood.com	
<1120>	Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No).	a	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps	

(1200) Ter Lifeline Data Colle	ms and Condition for Lifeline Customers ction Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	309018	
<015>	Study Area Name	Telrite Corporation	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert	
<035>	Contact Telephone Number - Number of person identified in data line <0303	4072601011 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030	> regulatory@csilongwood.com	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans		Name of Attached Document
<1220>	Link to Public Website HTTP	www.lifewireless.com	
or the web: § 54.422(a annually re <1221> <1222>	eck these boxes below to confirm that the attached document(s), on line 1210, site listed, on line 1220, contains the required information pursuant to   (2) annual reporting for ETCs receiving low-income support, carriers must port:  Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,  Details on the number of minutes provided as part of the plan,  Additional charges for toll calls, and rates for each such plan.		

	ice Cap Carrier Additional Documentation action Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
cluding	Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		July 2013
<010>	Study Area Code		
	Study Area Name	303018	
<020>	Program Year	Teirite Corporation	
<030>	Contact Name - Person USAC should contact regarding this data	2016	
<035>	Contact Telephone Number - Number of person identified in data line <030>	Mark Lammert	
<039>	Contact Email Address - Email Address of person identified in data line <030>	4072601011 ext.	
		regulatory@cs1longwood.com	
en e			NAMES OF STREET STREET, STREET
	e appropriate responses below (Yes, No, Not Applicable) to note compliance as America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The inforn		
	Incremental Connect America Phase I reporting		_
<2010>	2nd Year Certification (47 CFR § 54.313(b)(1)i)		
<2011a>	3rd Year Certification (47 CFR § 54.313(b)(1)ii)		
	RECOVER TO CONTROL OF THE WASHINGTON AND A TOTAL OF THE CONTROL OF		
<2011b>	Attachment (47 CFR § 54.313(b)(1)ii)		
		Name of Attached Document(s) Listing R	Required Information
		Name of Actached Document(s) Listing in	required information
50000	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))		
<2012>	2013 Frozen Support Calculation (47 CFR § 54.313(c)(1))		
<2013>	2014 Frozen Support Calculation (47 CFR § 54.313(c)(2))		
<2014>	2015 Frozen Support Calculation (47 CFR § 54.313(c)(3))		
<2015>	2016 and future Frozen Support Calculation (47 CFR § 54.313(c)(4))		
	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))		
<2016>	Certification Support Used to Build Broadband		
	Connect America Phase II Reporting (47 CFR § 54.313(e))		
<2017>	3rd year Broadband Service Certification		
<2018>			
<2019>			
<2020>	Please check the box to confirm that the attached document(s), on lin	2021 contains the required information	
	pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support sh	Il provide the number, names, and	
	addresses of community anchor institutions to which began providing	ccess to broadband service in the	
	preceding calendar year.		
<2021>	Interim Progress Community Anchor Institutions	1	
(2021)	interim Progress Community Anchor institutions	1	
		1	
		l	

	late Of Return Carrier Additional Documentation		FCC Form 481 OMB Control No. 3060-0986/CMB Control No. 3060-0819 July 2013
<010>	Study Area Code	309018	
<015>	Study Area Name	Telrite Corporation	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert	The state of the s
<035>	Contact Telephone Number - Number of person identified in data line <030>	4072601011 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilongwood.com	
CHECK	the boxes below to note compliance on its five year service quality plan (pursua CFR § 54.313(f)(2). I further certify that t	nt to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring he information reported on this form and in the documents attach	
(3010)	Progress Report on 5 Year Plan Milestone Certification (47 CFR § 54.313(1)(1)(1)	Name of Attached Document Listing Required Inform	ition
(3011)	Please check this box to confirm that the attached document(s), on line $\S$ 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addrovoviding access to broadband service in the preceding calendar year.		
(3012)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))		
(3013) (3014)	is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) If yes, does your company file the RUS annual report	Name of Attached Document Listing Required Information (Yes/No) (Yes/No)	38
Please	check these boxes to confirm that the attached document(s), on line 301	7, contains the required information pursuant to § 54.313(f)(2	compliance requires:
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)	3 - 10 - 0 (//-	
(3016)	Document(s) for Balance Sheet, Income Statement and Statement of Ca	ish Flows	
(3017)	if the response is yes on line 3014, attach your company's RUS annual report and all required documentation		
		Name of Attached Document Listing Required Information	
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No) i	$\mathcal{M}$
(3014)	it the response is no on line 3014, is your company addited?	(respire)	
	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains		
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a f		· 🗀
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of C		
(3021)	Management letter and audit opinion issued by the independent certified point from the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:	ublic accountant that performed the company's financial audit	
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications		
(3023)	Borrowers, Underlying information subjected to a review by an independent certified		
(3024) (3025)	public accountant Underlying Information subjected to an officer certification. Document(s) for Balance Sheet, Income Statement and Statement of Ca	ash Flows	
	Attach the worksheet listing required information		
	L		
		Name of Attached Document Listing Required Information	

(3000) Rate Of Return Cerrier Additional Documentation (Continued)  Data Collection Form				FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-08 July 2013	
<010>	Study Area Code		309018		
<015>	Study Area Name		Telrite Corporation		
<020>	Program Year		2016		
<030>	Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in da		Mark Lammert		
<039>	Contact Freephone Number - Number of person identified in da Contact Email Address - Email Address of person identified in da		4072601011 ext. regulatorv@csilongwood.com		
(3	ancial Data Summary 3027) Revenue				
	3028) Operating Expenses			_	
(	3029) Net Income				
(:	3030) Telephone Plant In Service(TPIS)				
(3	3031) Total Assets				
(3	3032) Total Debt				
(3	3033) Total Equity				
(3	3034) Dividends			7	

Certification - Reporting Carrier Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	309018
<015>	Study Area Name	Telrite Corporation
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert
<035>	Contact Telephone Number - Number of person identified in data line <030>	4072601011 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilongwood.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

# Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Telrite Corporation Signature of Authorized Officer: CERTIFIED ONLINE Date 06/25/2015 Printed name of Authorized Officer: Kelly Jesel Title or position of Authorized Officer: GFO Telephone number of Authorized Officer: 6782021294 ext. Study Area Code of Reporting Carrier: 309018 Filling Due Date for this form: 07/01/2015 Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

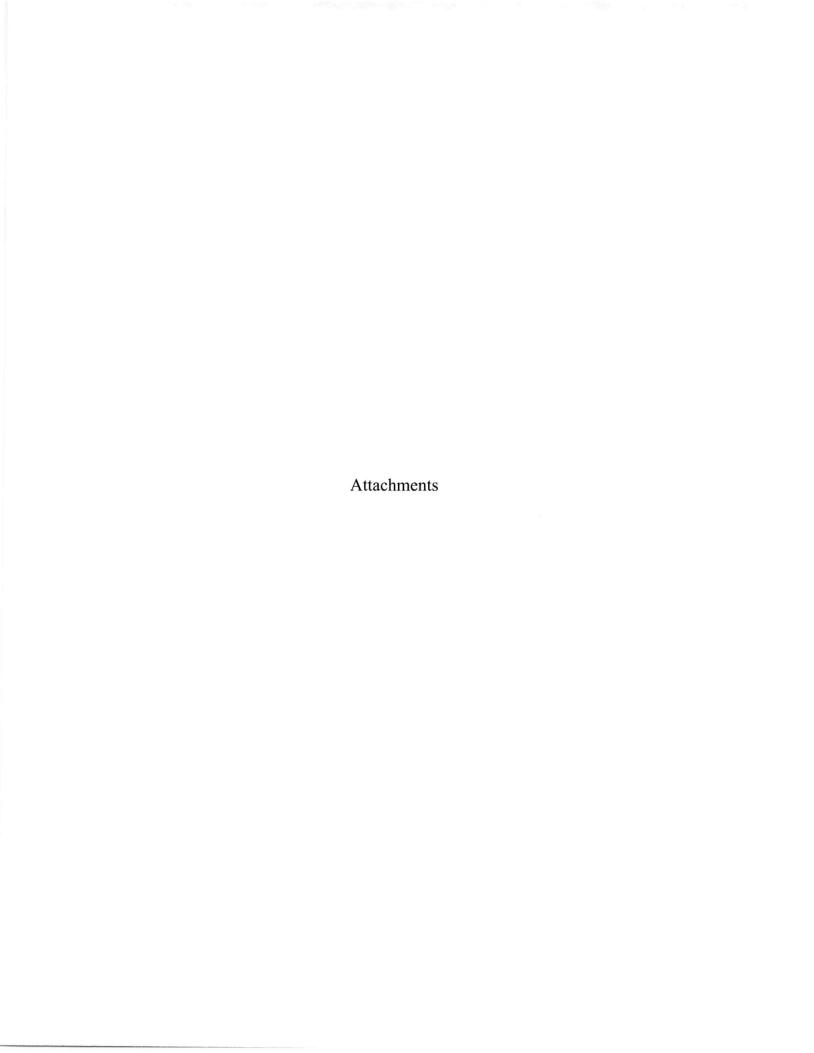
Certification - Agent / Carrier Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	309018
<015>	Study Area Name	Telrite Corporation
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert
<035>	Contact Telephone Number - Number of person identified in data line <030>	4072601011 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilongwood.com

# TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Auth	orize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier
I certify that (Name of Agent)is authorized to submit the information reported on behalf of the report also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form car	be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

## TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent	thorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier
l, as agent for the reporting carrier, certify that I am auth the data reported herein based on data provided by the r	ted to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have pro orting carrier; and, to the best of my knowledge, the information reported herein is accurate.
Name of Reporting Carrier:	
Name of Authorized Agent or Employee of Agent:	
Signature of Authorized Agent or Employee of Agent:	Date:
Printed name of Authorized Agent or Employee of Agent:	
Title or position of Authorized Agent or Employee of Agent	
Telephone number of Authorized Agent or Employee of Ag	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
	n be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment unde 18 of the United States Code, 18 U.S.C. § 1001.





### FCC Form 481

Section 500 – Service Quality Standards & Consumer Protection Rules Compliance

Under FCC Rules, Section 54.202, an ETC must comply that it will satisfy applicable consumer protection and service quality standards. Telrite Corporation d/b/a Life Wireless (Telrite) is in compliance with the Cellular Telecommunications and Internet Association's Consumer Code for Wireless Service.

- Telrite discloses rates and terms of service to customers at the time service is initiated.
  These same terms and conditions are posted on Telrite's website at
  www.lifewireless.com.
- 2. Telrite provides service availability information on their website at www.lifewireless.com.
- 3. Telrite provides contract terms to subscribers when they initiate or change service. These same terms are provided to subscribers during the annual recertification process as outlined in Commission rules that govern continued subscriber eligibility.
- 4. Telrite's Lifeline service can be terminated at any time by either party without an early termination fee. Service is dependent on continued eligibility in the program.
- 5. Telrite provides disclosures, minutes included in Lifeline plans, expiration of rollover minutes, availability of service, and cost for additional minutes in all published Lifeline advertising materials.
- 6. Telrite customers are provided options if they exceed the number of minutes provided in their Lifeline plan. If at any time a customer purchases additional minutes, charges and plan options are available on the company website at www.lifewireless.com.
- 7. Telrite's toll-free customer service number is 888-543-3620. Customers can also contact Telrite via email at info@lifewireless.com. This information is provided in the terms of service and on the company website and in all information provided to subscribers.
- 8. Telrite responds to all consumer inquiries and complaints received from government agencies within 30 days.
- 9. Telrite has procedures in place to maintain the privacy of subscriber proprietary information in accordance with applicable federal and state laws.
- 10. At service initiation, Telrite requests that subscribers "Opt In" to receive free notifications regarding activation status, balance alerts, etc. Customers can also decline to receive these messages and notices by "Opting Out". If a subscriber chooses to decline free notifications they will receive only those Lifeline notifications required by the FCC such as the 30-day non-usage notice, the recertification notices, etc. The customer cannot opt out of the required FCC notifications.



FCC Form 481 Section 600 - Functionality in Emergency Situations

Under FCC Rules, an ETC must demonstrate its ability to remain functional in emergency situations. Since Telrite Corporation d/b/a Life Wireless (Telrite) is providing service to its customers through the use of facilities obtained from other carriers, it is able to provide to its customers the same ability to remain functional in emergency situations as currently provided by the carriers to their own customers, including access to a reasonable amount of back-up power to ensure functionality without an external power source, re-routing traffic around damaged facilities, and the capability of managing traffic spikes resulting from emergency situations.

Telrite, along with their underlying carriers, have created back-up systems to ensure functionality in the event of a loss of power or network functionality. Telrite maintains its own diesel-powered backup generator at their switching facility in Georgia. All systems within the facility are implemented on redundant servers, each with redundant data network and power.

Telrite Corporation d|b|a Life Wireless does not have facilities in any state other than Georgia. It relies on the facilities of the underlying carrier in each state it provides service to demonstrate its own ability to function in emergency situations.

When a number is identified by a 911 dispatch center as belonging to an underlying carrier, the officer would call the underlying carrier who can assist with tracing the distressed caller or other network information. In the event further customer proprietary network information (CPNI) is needed to reach the distressed 911 caller, the underlying carrier would then direct the officer to contact the reseller, Life Wireless. All underlying carriers that Telrite utilizies have the contact number on file for Telrite d|b|a Life Wireless' customer service department.

When customer service receives a call from a 911 dispatch center, the call will be forwarded to a supervisor. The supervisor will require proof of identity generally by fax or email. After the officer and request is verified as an emergency situation, the information is released immediately. If the "officer" cannot be identified, a subpoena or court order is required.

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