

FILE

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The Public Utilities Commission of Ohio  
TELECOMMUNICATIONS FILING FORM  
(Effective: 01/20/2011)

This form is intended to be used with most types of required filings. It provides check boxes with rule references for the most common types of filings. It does not replace or supersede Commission rules in any way.

In the Matter of the Application of The Doylestown Telephone Company )  
Telephone Company to Change its Basic Local Exchange )  
Rates )

TRF Docket No. 90-5017-TP-TRF  
Case No. \_\_\_\_\_ - TP - \_\_\_\_\_  
NOTE: Unless you have reserved a Case #, leave the "Case No" fields BLANK.

Name of Registrant(s) The Doylestown Telephone Company

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

Address of Registrant(s) 81 N. Portage Street, Doylestown, Ohio 44230-1349

Company Web Address www.doylestowntelephone.com

Regulatory Contact Person(s) Tom Brockman Phone 330-658-2121 Fax 330-658-3344

Regulatory Contact Person's Email Address tbrockman@doylestowntelephone.com

Contact Person for Annual Report David Jones Phone 330-658-3401

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

Consumer Contact Information Christina Furney Phone 330-658-4500

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

Motion for protective order included with filing?  Yes  No

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

RECEIVED-DOCKETING DIV  
2015 NOV 30 PM 1:57

Notes:

Section I and II are Pursuant to Chapter 4901:1-6 OAC.  
Section III – Carrier to Carrier is Pursuant to 4901:1-7 OAC, and Wireless is Pursuant to 4901:1-6-24 OAC.  
Section IV – Attestation.

- (1) Indicate the Carrier Type and the reason for submitting this form by checking the boxes below.
- (2) For requirements for various applications, see the identified section of Ohio Administrative Code Section 4901 and/or the supplemental application form noted.
- (3) Information regarding the number of copies required by the Commission may be obtained from the Commission's web site at [www.puco.ohio.gov](http://www.puco.ohio.gov) under the docketing information system section, by calling the docketing division at 614-466-4095, or by visiting the docketing division at the offices of the Commission.
- (4) An Incumbent Local Exchange Carrier (ILEC) offering basic local exchange service (BLES) outside its traditional service area should choose CLEC designation when proposing to offer BLES outside its traditional service area or when proposing to make changes to that service.

All Filings that result in a change to one or more tariff pages require, at a minimum, the following 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).

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.  
Page 1 of 4  
Technician TN Date Processed DEC 01 2015

**Section I – Part I - Common Filings**

<b>Carrier Type</b> <input type="checkbox"/> Other (explain below)	<input checked="" type="checkbox"/> For Profit ILEC	<input type="checkbox"/> Not For Profit ILEC	<input type="checkbox"/> CLEC
Change terms & conditions of existing BLES	<input type="checkbox"/> ATA 1-6-14(H) (Auto 30 days)	<input type="checkbox"/> ATA 1-6-14(H) (Auto 30 days)	<input type="checkbox"/> ATA 1-6-14(H) (Auto 30 days)
Introduce non-recurring charge, surcharge, or fee to BLES			<input type="checkbox"/> ATA 1-6-14(H) (Auto 30 days)
Introduce or Increase Late Payment	<input type="checkbox"/> ATA 1-6-14(I) (Auto 30 days)	<input type="checkbox"/> ATA 1-6-14(I) (Auto 30 days)	<input type="checkbox"/> ATA 1-6-14(I) (Auto 30 days)
Revisions to BLES Cap.	<input type="checkbox"/> ZTA 1-6-14(F) (0 day Notice)		
Introduce BLES or expand local service area (calling area)	<input type="checkbox"/> ZTA 1-6-14(H) (0 day Notice)	<input type="checkbox"/> ZTA 1-6-14(H) (0 day Notice)	<input type="checkbox"/> ZTA 1-6-14(H) (0 day Notice)
Notice of no obligation to construct facilities and provide BLES	<input type="checkbox"/> ZTA 1-6-27(C) (0 day Notice)	<input type="checkbox"/> ZTA 1-6-27(C) (0 day Notice)	
Change BLES Rates	<input checked="" type="checkbox"/> TRF 1-6-14(F) (0 day Notice)	<input type="checkbox"/> TRF 1-6-14(F)(4) (0 day Notice)	<input type="checkbox"/> TRF 1-6-14(G) (0 day Notice)
To obtain BLES pricing flexibility	<input type="checkbox"/> BLS 1-6-14 (C)(1)(c) (Auto 30 days)		
Change in boundary	<input type="checkbox"/> ACB 1-6-32 (Auto 14 days)	<input type="checkbox"/> ACB 1-6-32 (Auto 14 days)	
Expand service operation area			<input type="checkbox"/> TRF 1-6-08(G)(0 day)
BLES withdrawal			<input type="checkbox"/> ZTA 1-6-25(B) (0 day Notice)
<b>Other*</b> (explain) _____			

**Section I – Part II – Customer Notification Offerings Pursuant to Chapter 4901:1-6-7 OAC**

Type of Notice	Direct Mail	Bill Insert	Bill Notation	Electronic Mail
<input type="checkbox"/> 15-day Notice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> 30-day Notice	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Date Notice Sent: November 1, 2015</b>				

**Section I – Part III – IOS Offerings Pursuant to Chapter 4901:1-6-22 OAC**

IOS	Introduce New	Tariff Change	Price Change	Withdraw
<input type="checkbox"/> IOS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section II – Part I – Carrier Certification - Pursuant to Chapter 4901:1-6-08, 09 & 10 OAC**

Certification	ILEC (Out of Territory)	CLEC	Telecommunications Service Provider Not Offering Local	CESTC	CETC
* See Supplemental form	<input type="checkbox"/> ACE 1-6-08 * (Auto 30- day)	<input type="checkbox"/> ACE 1-6-08 *(Auto 30 day)	<input type="checkbox"/> ACE 1-6-08 *(Auto 30 day)	<input type="checkbox"/> ACE 1-6-10 (Auto 30 day)	<input type="checkbox"/> UNC1-6-09 *(Non-Auto)

\*Supplemental Certification forms can be found on the Commission Web Page.

**Section II – Part II – Certificate Status & Procedural**

Certificate Status	ILEC	CLEC	Telecommunications Service Provider Not Offering Local
Abandon all Services		<input type="checkbox"/> ABN 1-6-26 (Auto 30 days)	<input type="checkbox"/> ABN 1-6-26 (Auto 30 days)
Change of Official Name *	<input type="checkbox"/> ACN 1-6-29(B) (Auto 30 days)	<input type="checkbox"/> ACN 1-6-29(B) (Auto 30 days)	<input type="checkbox"/> CIO 1-6-29(C) (0 day Notice)
Change in Ownership *	<input type="checkbox"/> ACO 1-6-29(E) (Auto 30 days)	<input type="checkbox"/> ACO 1-6-29(E) (Auto 30 days)	<input type="checkbox"/> CIO 1-6-29(C) (0 day Notice)
Merger *	<input type="checkbox"/> AMT 1-6-29(E) (Auto 30 days)	<input type="checkbox"/> AMT 1-6-29(E) (Auto 30 days)	<input type="checkbox"/> CIO 1-6-29(C) (0 day Notice)
Transfer a Certificate *	<input type="checkbox"/> ATC 1-6-29(B) (Auto 30 days)	<input type="checkbox"/> ATC 1-6-29(B) (Auto 30 days)	<input type="checkbox"/> CIO 1-6-29(C) (0 day Notice)
Transaction for transfer or lease of property, plant or business *	<input type="checkbox"/> ATR 1-6-29(B) (Auto 30 days)	<input type="checkbox"/> ATR 1-6-29(B) (Auto 30 days)	<input type="checkbox"/> CIO 1-6-29(C) (0 day Notice)

\* Other exhibits may be required under the applicable rule(s). ACN, ACO, AMT, ATC, ATR and CIO applications see the 4901:1-6-29 Filing Requirements on the Commission's Web Page for a complete list of exhibits.

**Section III – Carrier to Carrier (Pursuant to 4901:1-7), and Wireless (Pursuant to 4901:1-6-24)**

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)
Request rural carrier exemption, rural carrier suspension or modification	<input type="checkbox"/> UNC1-7-04 or 05 (Non-Auto)	
Changes in rates, terms & conditions to Pole Attachment, Conduit Occupancy and Rights-of-Way.	<input type="checkbox"/> UNC 1-7-23(B) (Non-Auto)	
<b>Wireless Providers</b> See 4901:1-6-24	<input type="checkbox"/> RCC [Registration & Change in Operations]	<input type="checkbox"/> NAG [Interconnection Agreement or

**Section IV. – Attestation**

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

**AFFIDAVIT**  
***Compliance with Commission Rules***

I am an officer/agent of the applicant corporation, Doylstown Telephone Company, and am authorized to make this statement on its behalf.

Kathy E. Hobbs  
(Name)

Please Check ALL that apply:

I attest that these tariffs comply with all applicable rules for the state of Ohio. I understand that tariff notification filings do not imply Commission approval and that the Commission's rules 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 attest that customer notices accompanying this filing form were sent to affected customers, as specified in Section II, in accordance with Rule 4901:1-6-7, Ohio Administrative Code.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on (Date) 11-30-15

at (Location) Columbus, Ohio 43215

\*(Signature and Title) Kathy E. Hobbs (Date) 11-30-15

Kathy E. Hobbs, Consultant  
Authorized Agent

- *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, Kathy E. Hobbs verify that I have utilized the Telecommunications Filing Form for most 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) Kathy E. Hobbs Consultant/Authorized Agent (Date) 11-30-15

*\*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**  
**(Current Tariff Pages)**

P.U.C.O. NO. 8

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DOYLESTOWN EXCHANGE RATES

A. GENERAL

1. The base rate area shall be as defined on the Exchange Base Rate map.
2. Access line, as referred to in this tariff is the Telephone Company line from the central office switching point up to and including the termination point on the customer's premises.

B. SCHEDULE OF PRINCIPAL MONTHLY RATES

	Business	Max. Rate	Residence	Max. Rate	Payphones	
Individual Access Line	\$21.15	\$21.15	\$11.55	\$11.55	\$18.65	(C)
Coin Supervision Additive	----		----		\$ 7.20	

C. EXTENDED AREA SERVICE

Extended Area Service (two-way non-optional flat rate service) is furnished to the subscribers of The Doylestown Telephone Company to the Akron, Ohio, exchange of the Ohio Bell Telephone Company dba AT&T Ohio and other carriers with Akron, Ohio exchanges.

D. SERVICE CONNECTION CHARGES

For all telephone service connections ordered by a subscriber for installation at the same time and considered standard by the Telephone Company, the following nonrecurring charges will apply:

1. Initial Service Order Charge \$15.00\*
2. Initial Service Connection Charge \$25.00\*
3. Subsequent Service Order Charge \$ 5.00

Receiving, recording and processing information necessary to execute a customer's request for a change of service.

\*Payment of the Initial Service Order Charge and the Initial Service Connection Charge may be spread over three (3) months.

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Issued: November 26, 2014

Effective: December 1, 2014

In Accordance with Case No. 10-1010-TP-ORD and 11-3017-TP-ATA

Issued by the Public Utilities Commission of Ohio

Thomas J. Brockman, President

**EXHIBIT B**  
**(Proposed Tariff Pages)**

P.U.C.O. NO. 8

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DOYLESTOWN EXCHANGE RATES

A. GENERAL

1. The base rate area shall be as defined on the Exchange Base Rate map.
2. Access line, as referred to in this tariff is the Telephone Company line from the central office switching point up to and including the termination point on the customer's premises.

B. SCHEDULE OF PRINCIPAL MONTHLY RATES

	Business	Max. Rate	Residence	Max. Rate	Payphones	
Individual Access Line	\$22.40	\$22.40	\$12.80	\$12.80	\$18.65	(C)
Coin Supervision Additive	----		----		\$ 7.20	

C. EXTENDED AREA SERVICE

Extended Area Service (two-way non-optional flat rate service) is furnished to the subscribers of The Doylestown Telephone Company to the Akron, Ohio, exchange of the Ohio Bell Telephone Company dba AT&T Ohio and other carriers with Akron, Ohio exchanges.

D. SERVICE CONNECTION CHARGES

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3. Subsequent Service Order Charge \$ 5.00

Receiving, recording and processing information necessary to execute a customer's request for a change of service.

\*Payment of the Initial Service Order Charge and the Initial Service Connection Charge may be spread over three (3) months.



**EXHIBIT C**  
**(Description of the Changes)**

In this application, The Doylestown Telephone Company requests a change in its Basic Local Exchange Rates (BLES). The Doylestown Telephone Company was granted BLES pricing flexibility, effective July 1, 2013. The company requests an increase for both business and residential customers by \$1.25 per month in its Doylestown Exchange, effective December 1, 2015. Obtaining increases at this time is essential for the Company to bring its rates more in line with the national average and continue to provide its customers with excellent telephone service.

## EXHIBIT D

### (Customer Notice and Affidavit)

The following customer notice appeared on bills that were mailed to Doylestown Telephone Company customers on November 1, 2015. This notice was sent to the Office of Ohio Consumers' Counsel and to the Commission's electronic mailbox (Telecomm-Rule07@puc.state.oh.us) prior to the rate increase:

Effective December 1, 2015, our local telephone rates will increase by \$1.25 per month for residential and business customers. The residential customer rate will go from \$11.55 to \$12.80 and the business customer rate will go from \$21.15 to \$22.40. The increases are necessary to bring our local rates more in line with the national average and continue to provide our customers with excellent telephone service. If you have any questions about the revised rates, please call our office at (330) 658-2121.

### AFFIDAVIT

The following affidavit was prepared and filed with the Commission after the customer notice was provided to customers on November 1, 2015:

I, Kathy E. Hobbs, am an authorized agent of the applicant corporation, The Doylestown Telephone Company, and am authorized to make this statement on its behalf.

I attest that the customer notice accompanying this affidavit was sent to affected customers as a bill message on November 1, 2015, in accordance with Rule 4901:1-6-07, Ohio Administrative Code. I declare under penalty of perjury that the foregoing is true and correct.

Executed on (date) November 30, 2015 at (Location) Columbus, Ohio

Signature: Kathy E. Hobbs  
Kathy E. Hobbs  
Consultant/Authorized Agent  
for Doylestown Telephone Company