



210 N. Park Ave.
Winter Park, FL
32789

P.O. Drawer 200
Winter Park, FL
32790-0200

Tel: 407-740-8575
Fax: 407-740-0613
tmi@tminc.com

Renée Jenkins,
Secretary of Commission
Public Utilities Commission of Ohio
180 East Broad Street
Columbus, Ohio 43266-0573

**RE: Application for Tariff Revision of
Time Warner Telecom of Ohio, LLC
PUCO Tariff No. 6 - Local Services 04-58-TP-ZTA
Proposed Effective Date: January 16, 2004**

Dear Ms. Jenkins:

Enclosed for filing please find one original and ten (10) copies of the Application to Revise Time Warner Telecom of Ohio, LLC's local tariff. This filing incorporates text changes and revises the description for Directory Assistance Call Completion. The Company respectfully requests this tariff revision to become effective on January 16, 2004.

The following documents are included with this filing:

Telecommunications Application Form
Exhibit A - Superseded Tariff Pages
Exhibit B - Revised Tariff Pages
Exhibit C - Customer Notice
Exhibit D - Rationale for Tariff Revision

Questions regarding this filing may be directed to my attention at (407) 740-8575 or via e-mail at cwrightman@tminc.com.

Please acknowledge receipt of this filing by date-stamping the extra copy of this cover letter and returning it to me in the self-addressed, stamped envelope provided for this purpose.

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 CH Date Processed 1/15/04

RECEIVED-DOCKETING DIV
2004 JAN 15 AM 11:09

January 14, 2004
Via Overnight Delivery

PUCO

17

January 14, 2004
Renée Jenkins,
Secretary of Commission
Public Utilities Commission of Ohio
Page 2

Thank you for your assistance.

Sincerely,

A handwritten signature in black ink, appearing to read "Connie Wightman". The signature is stylized with large, overlapping loops.

Per Connie Wightman
Consultant to Time Warner Telecom of Ohio, LLC

CW/im.

Enclosures

cc: Office of Ohio Utilities Consumer Counsel
Connie Simon, Time Warner Telecom- CO
File: Time Warner Telecom of Ohio - Local Tariff No. 6
TMS: OHL0401
Project: 04-013

TELECOMMUNICATIONS APPLICATION FORM

(Effective: 7/23/2003)

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

In the Matter of the Application of
Time Warner Telecom of Ohio, L.P.
to Resell Telecommunications Services

)
) Case No. 04 - 58 - TP - ZTA
)
)
RECEIVED-DOCKETING DIV
2004 JAN 15 AM 11:09

Name of Registrant(s) Time Warner Telecom of Ohio, LLC.
Address of Registrant(s) 4625 West 8th Street, Suite 500, Indianapolis, Indiana 46268
Company Web Address twtelecom.com
Regulatory Contact Person(s) Connie Wightman, Technologies Management, Inc. Phone 407-740-8575 Fax 407-740-8575
Regulatory Contact Person's Email Address cwightman@tminc.com
Contact Person for Annual Report Connie Simon, Time Warner Telecom Phone 303-566-1276
Consumer Contact Information Connie Simon, Time Warner Telecom Phone 303-566-1276

Date January 14, 2004 TRF Docket No. 90-9011-TP-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 (AEC) 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)
 - ☐ 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 (RRC) 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 (ZTA) Tariff Application Involving only Tier 2 Services
 - ☐ 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 For Tier 2 Services – indicate which option you intend to adopt to maintain the tariff
 - ☐ 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"/> resold services, <input type="checkbox"/> facilities-based services, or <input type="checkbox"/> both resold 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, at a minimum, a pro forma income statement and a balance sheet. If the pro forma income statement is based upon a certain geographical area(s) or information in other jurisdictions, please indicate.
<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 GAAP.
<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 251 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"/>	[3,4,7,10-11,13]	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 certificate 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"/>	[1-2,4-7,9,12-13,16,18-24]	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 type="checkbox"/> business; <input type="checkbox"/> residence; or <input type="checkbox"/> both. Also indicate whether it is a <input 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), 20-21]	Specify which notice procedure has been utilized: <input type="checkbox"/> direct mail; <input type="checkbox"/> bill insert; <input type="checkbox"/> bill notation or <input type="checkbox"/> electronic mail. NOTE: Tier 1 price list increases must be within an approved range of rates.
<input checked="" 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 provided to customers. For SLF's the customer notice will be addressed in a Commission Order.
<input type="checkbox"/>	[1,2,5,9a(v),11-13, 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 counties 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.
<input type="checkbox"/>		If Mirroring Large ILEC exchanges for both serving area and local calling areas: • Serving area 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/CLEC territory, and listing the involved exchanges. • Local calling areas 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.
<input type="checkbox"/>		If Self-defining serving area and/or local calling area as an area other than that of the established ILEC exchange(s): • Serving Area must be clearly reflected on an Ohio map attached to the tariffs, and textually described in tariffs by listing the involved exchanges. • Local Calling Areas 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.
	[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 tariff's web address:

- 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:

- ☒ I+ 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) service]
- 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 make and/or affirm or verify filings at the Commission on behalf of the applicant:

Connie Wightman, Consultant to Time Warner Telecom of Ohio, LLC, Technologies Management, Inc. 210 Park Avenue North
Winter Park, Florida 32789

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.

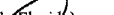
- V. List names, titles, phone numbers, and addresses of those persons authorized to respond to inquiries from the Consumer Services Department on behalf of the applicant regarding end-user complaints:

Connie Simon, Senior Manager - Regulatory, Legal Department, Time Warner Telecom of Ohio, LLC 10475 Park Meadows Drive, Suite
400, Littleton, Colorado 80124 (303) 566-1276

AFFIDAVIT

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


ter Park, Florida)



Connie Wightman, Consultant
Time Warner Telecom of Ohio, LLC

[illegible]

VERIFICATION


*Connie Wightman, Consultant
To Time Warner Telecom of Ohio, LLC

***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 prefiling submittal)
180 East Broad Street, Columbus, OH 43215-3793

Exhibit A

Superseded Tariff Sheets

APPLICATION OF TARIFF

This Tariff sets forth the service offerings, rates, terms and conditions applicable to the furnishing of intrastate End User communications services over the facilities of Time Warner Telecom of Ohio, L.P. for local services and is currently effective in areas within the following counties:

Butler
Clermont
Clinton
Delaware
Franklin
Greene
Hamilton
Marion
Montgomery
Union
Warren

To the extent facilities are available, the services offered under this tariff are provided by the Company on an On-Net basis. Unless otherwise noted, pricing for services offered under this tariff reflect the On-Net price for such services. Where service is provided on an Off-Net basis, additional charges may apply.

Issued: August 12, 2002

Effective: December 3, 2002

Issued By: Pamela Sherwood
Vice President, Regulatory – Midwest Region
4625 West 86th Street, Suite 500
Indianapolis, IN 46268

Case __ - __ -TP __

OHL0214

SECTION 1 - DEFINITIONS

Access Services: The Company's intrastate telephone services offered pursuant to this Tariff.

Advance Payment: Part or all of a payment required before the start of service.

Automatic Number Identification ("ANI"): Allows the automatic transmission of a caller's billing account telephone number to a local exchange company, interexchange carrier or a third party Customer. The primary purpose of ANI is to allow for billing of toll calls.

Bit: The smallest unit of information in the binary system of notation.

Collocation: An arrangement whereby the Company's switching equipment is located in a local exchange Company's central office.

Commission: The Public Utilities Commission of Ohio.

Communications Services: The Company's intrastate toll and local exchange switched telephone services offered for both intraLATA and interLATA use.

Company: Time Warner Telecom of Ohio, L.P.

Customer or Subscriber: The person, firm or corporation that orders service and is responsible for the payment of charges and compliance with the Company's regulations.

Dedicated Inbound Calls: Refers to calls that are terminated via dedicated access facilities connecting the Customer's premises and the Company's Point of Presence ("POP"). This service is offered to the extent facilities are available and where the Company and the Customer jointly arrange for the establishment of dedicated access facilities connecting the Customer's trunk-compatible PBX or other suitable equipment to the Company's POP. The Customer shall be responsible for all costs and charges associated with the dedicated access facilities.

Issued: August 12, 2002

Effective: December 3, 2002

Issued By: Pamela Sherwood
Vice President, Regulatory – Midwest Region
4625 West 86th Street, Suite 500
Indianapolis, IN 46268

Case ____-____-TP ____

OHL0214

SECTION 5 - NETWORK SERVICES DESCRIPTIONS *continued*

5.7 Directory Assistance *continued*

5.7.3 Call Completion

A charge applies for each request made to the Directory Assistance Operator in which the operator completes the call to the desired number, and are in addition to the charge for Directory Assistance.

(N)
|
|
|
(N)

Issued: July 16, 2003

Effective: August 16, 2003

Issued By: Pamela Sherwood
Vice President, Regulatory – Midwest Region
4625 West 86th Street, Suite 500
Indianapolis, IN 46268

Case 03-1549-TP-ATA

OHL0214

Exhibit B

Revised Tariff Sheets

APPLICATION OF TARIFF

This Tariff sets forth the service offerings, rates, terms and conditions applicable to the furnishing of intrastate End User communications services over the facilities of Time Warner Telecom of Ohio, LLC for local services and is currently effective in areas within the following counties:

(T)

Butler
Clermont
Clinton
Delaware
Franklin
Greene
Hamilton
Marion
Montgomery
Union
Warren

To the extent facilities are available, the services offered under this tariff are provided by the Company on an On-Net basis. Unless otherwise noted, pricing for services offered under this tariff reflect the On-Net price for such services. Where service is provided on an Off-Net basis, additional charges may apply.

Issued: January 15, 2004

Effective: January 16, 2004

Issued By: Pamela Sherwood
Vice President, Regulatory – Midwest Region
4625 West 86th Street, Suite 500
Indianapolis, IN 46268

Case 04-____-TP-ZTA

OHL0401

SECTION 1 - DEFINITIONS

Access Services: The Company's intrastate telephone services offered pursuant to this Tariff.

Advance Payment: Part or all of a payment required before the start of service.

Automatic Number Identification ("ANI"): Allows the automatic transmission of a caller's billing account telephone number to a local exchange company, interexchange carrier or a third party Customer. The primary purpose of ANI is to allow for billing of toll calls.

Bit: The smallest unit of information in the binary system of notation.

Collocation: An arrangement whereby the Company's switching equipment is located in a local exchange Company's central office.

Commission: The Public Utilities Commission of Ohio.

Communications Services: The Company's intrastate toll and local exchange switched telephone services offered for both intraLATA and interLATA use.

Company: Time Warner Telecom of Ohio, LLC

(T)

Customer or Subscriber: The person, firm or corporation that orders service and is responsible for the payment of charges and compliance with the Company's regulations.

Dedicated Inbound Calls: Refers to calls that are terminated via dedicated access facilities connecting the Customer's premises and the Company's Point of Presence ("POP"). This service is offered to the extent facilities are available and where the Company and the Customer jointly arrange for the establishment of dedicated access facilities connecting the Customer's trunk-compatible PBX or other suitable equipment to the Company's POP. The Customer shall be responsible for all costs and charges associated with the dedicated access facilities.

Issued: January 15, 2004

Effective: January 16, 2004

Issued By: Pamela Sherwood
Vice President, Regulatory – Midwest Region
4625 West 86th Street, Suite 500
Indianapolis, IN 46268

Case 04-____-TP-ZTA

OHL0401

SECTION 5 - NETWORK SERVICES DESCRIPTIONS *continued*

5.7 **Directory Assistance** *continued*

5.7.3 **Call Completion**

A charge applies for each request made to the Directory Assistance Operator in which the operator completes the call to the desired number, and are in addition to the charge for Directory Assistance. If the Customer elects to have an intraLATA toll call completed by the Local Directory Assistance operator, the Company's standard intraLATA toll per minute charges will apply.

(T)
|
|
(T)

Issued: January 15, 2004

Effective: January 16, 2004

Issued By: Pamela Sherwood
Vice President, Regulatory – Midwest Region
4625 West 86th Street, Suite 500
Indianapolis, IN 46268

Case 04-____-TP-ZTA

OHL0401

Exhibit C

Copy of Notice and Procedure

Exhibit D

Rationale for Tariff Changes

This filing incorporates text changes and revises the description for Directory Assistance Call Completion. The Company respectfully requests this tariff revision to become effective on January 16, 2004.
