

**LAW OFFICES OF SARAH J. READ**

NEGOTIATION • MEDIATION • ARBITRATION

LEGISLATION • LAW PRACTICE MANAGEMENT • ORGANIZATIONS

November 17, 2008

**FILED<sup>2</sup>**

NOV 18 2008

Colleen M. Dale, Secretary  
Missouri Public Service Commission  
200 Madison Street  
P.O. Box 360  
Jefferson City, MO 65102

**Missouri Public  
Service Commission**

Re: Application of Consolidated Communications Network Services, Inc. for Certificate of Service Authority to Provide Private Pay Telephone Service in the State of Missouri

Dear Ms. Dale:

Attached please find the Application of Consolidated Communications Network Services, Inc. for Certificate of Service Authority to Provide Private Pay Telephone Service in the State of Missouri. This Application is related to the Application For Transfer of Assets filed on Friday, November 14, 2008 in Case Number XN 2009-0196, the plan to file this application was referenced in paragraph 32 of that application, and an unsigned copy was attached as Exhibit 13.

Please contact the undersigned if there are any questions. Thank you for your assistance.

Yours truly,

/s/ Sarah J. Read

Sarah J. Read

Cc (via EFIS): Office of Public Counsel  
Governor Office Bldg., Suite 650  
Jefferson City, MO 65102-2230

Kevin Thompson, General Counsel  
200 Madison Street, PO Box 360  
Jefferson City, MO 65102-0360

FILED<sup>2</sup>

NOV 18 2008

Missouri Public Service Commission

BEFORE THE PUBLIC SERVICE COMMISSION OF THE STATE OF MISSOURI

In the matter of the application of ) Cons. Comm. Network Services, Inc. ) for certificate of service authority to provide private pay telephone service within the State of Missouri )

APPLICATION FOR CERTIFICATE OF SERVICE AUTHORITY TO PROVIDE PRIVATE PAY TELEPHONE SERVICE IN THE STATE OF MISSOURI

PLEASE PRINT OR TYPE:

Consolidated Communications

Network Services, Inc.

1. NAME OF APPLICANT

DATE OF APPLICATION

ADDRESS OF PRINCIPAL PLACE OF BUSINESS: Street: 350 South Loop 336 West

If the Commission or Staff has questions about this Application, they should contact:

City: Conroe State: TX 77304

Name: Bill Terry Address: 350 South Loop 336 West

Phone: 866-896-3185

Daytime Phone: 936-788-7421

APPLICANT IS:

- INDIVIDUAL DOING BUSINESS UNDER OWN NAME
INDIVIDUAL DOING BUSINESS UNDER FICTITIOUS NAME (Attach a copy of registration of fictitious name with Secretary of State)
PARTNERSHIP (Attach copy of partnership agreement - Missouri Bar Attorney must file the application)
MISSOURI CORPORATION (Attach certified copy of Articles of Incorporation and Certificate of Incorporation from Secretary of State - Missouri Bar Attorney must file the application)
CORPORATION - NOT MISSOURI (Attach certificate of authorization to do business in Missouri from Secretary of State - Missouri Bar Attorney must file the application)

~ IMPORTANT ~

PAGES 2, 3, AND 4 MUST BE ATTACHED AND APPLICATION MUST BE SIGNED AND NOTARIZED ON PAGE 4 TO BE PROCESSED. IF APPLICANT IS A PARTNERSHIP OR CORPORATION, APPLICATION MUST BE SIGNED BY AN AUTHORIZED MEMBER OR CORPORATE OFFICER, NOTARIZED, AND SIGNED BY APPLICANT'S ATTORNEY.

**APPLICATION SHOULD BE MAILED TO BOTH:**

Missouri Public Service Commission  
 P.O. Box 380  
 Jefferson City, MO 65102  
 (Original and 8 copies)

Office of the Public Counsel  
 P.O. Box 7800  
 Jefferson City, MO 65102  
 (One copy)

2. Applicant proposes to provide private pay telephone service in the State of Missouri under the jurisdiction of the Missouri Public Service Commission (Commission) pursuant to Section 392.410 and 392.520 C.C.S. & C.S. MS 350 and which is referred to therein as customer owned coin telephone telecommunications service, but will herein be referred to as private pay telephone service, and requests certificate of service authority to install, operate, control, manage and maintain private pay telephone(s).
3. Applicant requests that this certificate of service authority be made applicable to additional locations which may be served by the Applicant in the future.
4. As a provider of private pay telephone service, I agree that my private pay telephone equipment (hereafter equipment) shall have the following operational characteristics and I agree to abide by the following terms:
  - a. Users of the equipment shall be able to reach the operator without charge and without the use of a coin.
  - b. Any intrastate operator services provider employed shall hold a certificate of service authority from this Commission, and shall have on file with the Commission approved tariffs for the provision of operator services to traffic aggregators.
  - c. Users of the equipment shall be able to reach local 911 emergency service, where available, without charge and without using a coin or, if 911 is unavailable, there shall be a prominent display on each instrument of the required procedure to reach local emergency service without charge and without using a coin.
  - d. The equipment shall be mounted in accordance with all applicable Federal, State, and local laws for disabled and/or hearing impaired persons.
  - e. The equipment shall allow the completion of local and long distance calls.
  - f. The equipment shall permit access to directory assistance.
  - g. There shall be displayed in close proximity to the equipment in 12 Point Times Bold print the name, address and telephone number of the private pay telephone service provider, the procedures for reporting service difficulties, the method of obtaining customer refunds and the method of obtaining long distance access. If applicable, the notice shall state that one-way calling only is permitted. If an alternative operator service (AOS) provider is employed, the private pay telephone service provider shall display such notice as is required by the Commission.
  - h. The equipment shall be registered under Part 68 of the rules of the Federal Communications Commission's registration program.
  - i. The equipment shall not block access to any local or interexchange telecommunications carrier.
5. I understand and agree that the certificate of service authority will permit me to provide only private pay telephone service in the State of Missouri and will not authorize me to provide any other telecommunications services regulated by the Commission.

Revised 6/16/2003

- 6. I understand that the certificate of service authority to provide private pay telephone service is not transferable.
- 7. I understand that providing pay telephone service without a certificate of service authority or in violation of the terms and conditions prescribed for the provision of such service may subject me to penalties as provided for by law.
- 8. I agree to provide a complete list of served locations if this information is requested by the Commission staff.
- 9. I further agree to notify the Commission, in writing, if I cease to provide private pay telephone service in the State of Missouri or if my address or phone number at the site of my principal place of business.
- 10. Unless and until otherwise ordered by the Commission, I agree to pay my annual apportioned share of general registrar expenditures that are charged to telephone companies pursuant to Section 386.370 RSMo.
- 11. I understand and agree that I will be responsible to the local exchange telephone company for payment of all toll and local charges originating from or accepted at the private pay telephone(s).
- 12. I understand and agree that charges for private pay telephone service will be assessed in accordance with the appropriate tariff of the local exchange telephone company providing service.

WHEREFORE, Applicant requests the Commission to grant its certificate of service authority to Applicant to install, operate, control, manage and maintain private pay telephone service in the State of Missouri as described above.

SIGNATURE: Steven L. Childers

PRINT OR TYPE NAME: Steven L. Childers

ADDRESS: 330 South Loop 336 West  
Osborne, MO 67204

PHONE: 938-788-7421

STATE OF TEXAS  
 COUNTY OF Montgomery  
 Came now before me Steven L. Childers and state that (the  
(Name of person signing Application)  
Chief Financial Officer of Consolidated Comm. of  
(Name of Applicant) Palmer Services, Inc. Applicant/herein, and (the  
(Name of Applicant)  
 further attests that the information contained in this Application is accurate to the best of his/her knowledge and belief.  
 Subscribed and sworn to before me this 17 day of November 2008



*Vera McKinley*  
 (Notary Public)

My Commission expires: 4-11-2009

ATTORNEY'S SIGNATURE BLOCK (for Partnership or Corporation)

SIGN HERE: *[Signature]*

PRINT or TYPE NAME: Sarah J. Read

ADDRESS: 1908 Cherry Hill Drive, Suite 200  
Columbia, MO 65205-3727

ZIP CODE: 65268

PHONE: 573-447-2349

No. F00519307

# STATE OF MISSOURI



**Matt Blunt**  
Secretary of State

## CORPORATION DIVISION - CERTIFICATE OF AUTHORITY

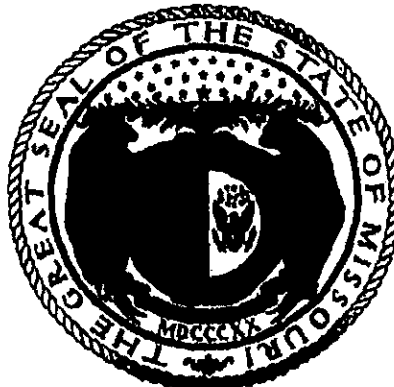
WHEREAS,  
CONSOLIDATED COMMUNICATIONS NETWORK SERVICES, INC.

using in Missouri the name  
CONSOLIDATED COMMUNICATIONS NETWORK SERVICES, INC.

has complied with the General and Business Corporation Law which governs Foreign Corporations; by filing in the office of the Secretary of State of Missouri authenticated evidence of its incorporation and good standing under the Laws of the State of DELAWARE.

NOW, THEREFORE, I, MATT BLUNT, Secretary of State of the State of Missouri, do hereby certify that said corporation is from this date duly authorized to transact business in this State, and is entitled to all rights and privileges granted to Foreign Corporations under the General and Business Corporation Law of Missouri.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 18th day of MARCH, 2003.



*Matt Blunt*

\$155.00

Secretary of State