



STATE OF ALABAMA

ALABAMA PUBLIC SERVICE COMMISSION
P. O. BOX 304260
MONTGOMERY, ALABAMA 36130-4260

LUCY BAXLEY, PRESIDENT

TWINKLE ANDRESS CAVANAUGH, ASSOCIATE COMMISSIONER

TERRY L. DUNN, ASSOCIATE COMMISSIONER

WALTER L. THOMAS, JR.

SECRETARY

TO: All Payphone Applicants

FROM: David Peeler
Service Quality Analysis & Compliance Manager
Telecommunications Division

SUBJECT: Information Pertaining to the Provision of Pay Telephone Service

To Whom It May Concern:

The information contained in this package has been compiled to assist you in the preparation of the enclosed required documents related to public telephone service.

The forms that need to be completed and returned to the Alabama Public Service Commission (APSC) include the Application Form (APSC COCOT Form 1) and the Standardized Tariff Form (APSC COCOT Form 2). You are required to file the original and ten (10) copies of each form when filing by mail. If you file electronically, you are required to file the original and one (1) copy of each form. To obtain registration instructions for electronic filing with the APSC contact the Secretaries Office at (334) 242-5218.

**BEFORE THE
ALABAMA PUBLIC SERVICE COMMISSION**

APPLICATION OF

(Company Name)

**FOR CERTIFICATE OF
PUBLIC CONVENIENCE AND NECESSITY
TO PROVIDE**

**CUSTOMER OWNED COIN OPERATED
TELEPHONE SERVICE
WITHIN THE STATE OF ALABAMA**

(This Space For Record For Commission Use Only)

DOCKET NUMBER: _____

DATE APPROVED: _____

THE ORIGINAL AND TEN (10) COPIES OF THIS FORM AND ANY REQUIRED ATTACHMENTS MUST BE COMPLETED BEFORE FILING WITH THE ALABAMA PUBLIC SERVICE COMMISSION. INCOMPLETE FORMS WILL BE RETURNED TO APPLICANT WITHOUT ACTION. ATTACH ADDITIONAL SHEETS WHERE NECESSARY.

SECTION 1

GENERAL

1.1 Application for Certificate of Public Convenience and Necessity to provide payphone service in the State of Alabama.

1.2 Type of Certificate herein applied for:

A. _____ Customer Owned Coin Operated Telephone Service.

B. _____ Local and toll payphone service within the guidelines established by the Alabama Public Service Commission.

1.3 Name of Applicant:

Contact Person: _____

Contact Person's Telephone Number: _____

Company Name: _____

Business Address: _____

City and County: _____

State and Zip Code: _____

Telephone Number: _____

SECTION 2

ORGANIZATION

2.1 Type Of Organization:

- _____ Individual
- _____ Partnership
- _____ Corporation
- _____ Other (Identify)

2.2 If a Corporation:

Attach a copy of Articles of Incorporation and current by-laws.

Non-Resident Corporation, attach a copy of the Certificate of Authority issued by the Secretary of State showing Corporation's authority to do business in Alabama.

2.3 If a Partnership:

Attach a copy of the Partnership Agreement.

Attach a list showing name and address of all partners.

2.4 If Non-Resident, designate an agent for services in Alabama:

Name: _____

Address: _____

City: _____

State and Zip Code: _____

County: _____

Telephone Number: _____

SECTION 3

MAINTENANCE AND REPAIRS

3.1 Who is the manufacturer of the instrument(s) you intend to install?

3.2 Describe the instrument(s) which will be provided by applicant, and include a brochure with picture and specifications of the instruments.

3.3 How does applicant intend to maintain each payphone?

- Personally
- Full-time technician
- Part-time technician
- Maintenance and Repair will be contracted.
- Other, Describe fully:

SECTION 3

MAINTENANCE AND REPAIRS (Continued)

- 3.4** Identify and describe fully the qualifications of the technician(s) responsible for the maintenance and repair of your payphones.

SECTION 4

TARIFFS

4.1 EACH APPLICANT SHALL FILE THE STANDARDIZED TARIFF AS PROVIDED.

4.2 When the company makes changes in the rules and regulations, or other provisions of the tariff, an official tariff filing shall be made to the Alabama Public Service Commission addressed as follows:

Secretary
Alabama Public Service Commission
P. O. Box 304260
Montgomery, Alabama 36130

For Overnight Delivery:

Secretary
Alabama Public Service Commission
RSA Union Building
100 North Union Street
Suite 850
Montgomery, Alabama 36104

SECTION 5

REPRESENTATION

5.1 Applicant's Attorney or Representative:

Name: _____

Address: _____

City: _____

State and Zip Code: _____

Telephone Number: _____

- 5.2** Applicant understands that the filing of this application does not constitute operating authority, and will submit such additional materials as the Commission may require.
- 5.3** Applicant also agrees that the Commission will be informed of any change in ownership, contact person, or any changes in names or addresses contained herein within thirty (30) days of such changes.
- 5.4** Applicant must pay the annual inspection and supervision fee as required under Section 37-2-41, Code of Alabama 1975.

SECTION 5

REPRESENTATION (Continued)

5.5 Applicant hereby affirms that he/she has received and read a copy of the Guidelines for Provision of Customer-Owned Pay Telephone Service, understands the requirements set forth therein, and will provide this service in full compliance with said guidelines.

As required by Alabama Public Service Commission, Telephone Rule T-13 Transfers and Acquisitions, the Commission shall be notified of any changes in names or addresses contained herein, within thirty (30) days of such changes.

(Signature of Applicant)

INSTRUCTIONS FOR COMPLETING THE ATTACHED
STANDARDIZED TARIFF

1. Cover page under tariff of: Write in company name.
2. Cover page after issued by: Write in the name and address of the person submitting the applications.
3. Index page 1: At the top left hand corner of this page you will find a line, write in the company's name. (See page 2)
4. After the word date: Write in the date you completed forms 1 and 2.
5. After the word by: Write in the name and address of the same person that is reflected on the cover page of the application.
6. This information must be entered on all pages of the tariff. No other entry is required on the heading of each tariff page. (See page 2 of the instructions.)
7. On page two (2) under application of tariff: In the space provided in paragraph three (3), write in the company name.
8. On page three (3) item 1.9, enter the company name.
9. On page six (6) items 2.1. and 2.1.a, enter the company name.
10. On page fourteen (14) item 3.6, enter the company name.
11. On page seventeen (17), enter company name in all paragraphs.
12. On page nineteen (19) items 6.1 and 6.2, enter company name.
13. **CONCLUSION**: If further assistance is required regarding the completion of the tariff, you can contact the Alabama Public Service Commission's Compliance Section at telephone number (334)242-5986

INSTRUCTIONS FOR COMPLETING THE HEADING OF EACH PAGE
CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

(1) _____ Page No. **(2)** _____
(Company Name)

ISSUE DATE: **(3)** _____ EFFECTIVE DATE: **(4)** _____

SUBMITTED BY: **(5)** _____ APSC DOCKET: **(6)** _____

(7) _____
(Company Address)

- (1)** Complete Company Name.
- (2)** Original Page Number – The tariff pages will be numbered 1-23.
- (3)** Date Tariff completed by company official.
- (4)** Do not complete.
- (5)** Company official submitting Tariff.
- (6)** This entry should be the Docket number authorizing your company to provide pay telephone service. Do not complete.
- (7)** Company Address.

TARIFF

OF

(Name of Company)

CONSISTING

OF

TERMS, CONDITIONS,

RULES AND REGULATIONS

FOR

CUSTOMER-OWNED PAY TELEPHONE SERVICE

PROVIDED WITHIN

THE STATE OF ALABAMA

No modification of this tariff shall be made without approval of the Alabama Public Service Commission

ISSUED BY: _____

ADDRESS: _____

DOCKET: _____

EFFECTIVE ON: _____

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

Page No. 1

(Company Name)

ISSUE DATE: _____

EFFECTIVE DATE: _____

SUBMITTED BY: _____

APSC DOCKET: _____

(Company Address)

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CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

Page No. 2

(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

SUBMITTED BY: _____ APSC DOCKET: _____

(Company Address)

APPLICATION OF TARIFF

This tariff contains regulations and rates applicable to the providing of intrastate customer owned pay telephone service. This tariff has been approved by and is on file with the Alabama Public Service Commission,

Service will be furnished in accordance with this tariff and no officer, employee, or representative of the company has any authority to waive, alter, or amend this tariff or any part thereof, in any respect.

The rules set forth herein apply to intrastate services provided by:

(Company Name)

SYMBOLS

- (C) To signify changed regulation.
- (D) To signify a deletion.
- (I) To signify an increase in rates.
- (L) To signify material relocated in the tariff
- (N) To signify a new rate or regulation.
- (R) To signify a reduction in rates.
- (T) To signify a change in test but no change in rate or regulation.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

Page No. 3

(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

SUBMITTED BY: _____ APSC DOCKET: _____

(Company Address)

SECTION 1

DEFINITIONS

- 1.1 Access Line** – A circuit provided by the local exchange company in accordance with approved tariffs applicable to customer-owned coin-operated telephones.
- 1.2 APSC** – Alabama Public Service Commission.
- 1.3 Automatic Acceptance** – Equipment of technologies that allow automatic acceptance of automated collect-only calls without action from the called party.
- 1.4 Automated Operator** – A device that provides operator assistance robotically in place of a “live” operator.
- 1.5 Certificated Carrier** - Any company approved by the APSC to provide long distance telecommunications service.
- 1.6 Chargeable Time** – Begins when the number called goes off-hook, and ends when either the calling or called party hangs up.
- 1.7 COCOT** – Customer-owned coin-operated telephone.
- 1.8 Coinless Phone** – A phone that operates without a coin deposit.
- 1.9 Company:** _____
- 1.10 Completed Collect Call** – Is completed when the called party indicates they will accept the charges.
- 1.11 Completed Call** – A call is completed when the called party answers.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

Page No. 4

(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

SUBMITTED BY: _____ APSC DOCKET: _____

(Company Address)

SECTION 1

DEFINITIONS (Cont'd)

- 1.12 **Commission** – Alabama Public Service Commission.
- 1.13 **Customer** - Any user of pay telephone service.
- 1.14 **Discount** - A reduction in rates provided during certain hours of the day, and day of the week.
- 1.15 **Inmate Collect Only Telephone Service** - That service which originates from within a federal, state, county, city or that service which originates from any confinement it correctional facility.
- 1.16 **IPP** – Independent Payphone Provider.
- 1.17 **LEC** – Local Exchanged Company.
- 1.18 **LATA** – Local access transport area.
- 1.19 **0+ To 1+ Conversion** – That service which uses technology from pay telephone facilities that will convert a 0+ dialed number to a 1+ dialed number.
- 1.20 **Operator Assisted Call** – Any call which requires an operator’s assistance.
- 1.21 **OSP** – Operator Service Provider.
- 1.22 **Premise** – Location of customer-owned pay telephone instrument.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

Page No. 5

(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

SUBMITTED BY: _____ APSC DOCKET: _____

(Company Address)

SECTION 1

DEFINITIONS (Cont'd)

- 1.23 Recognized Holidays** – New Year’s Day, Labor Day, Thanksgiving Day, Independence Day and Christmas Day.
- 1.24 Store and Forward** – Terminology identifying the procedure where an automated operator cues the customer to enter or provide the necessary 0+ information; i.e, number called, calling or credit card number, or collect call information, store this information until it’s verified; and then forwards the call to the switch as a 1+ call. This procedure is also referred to as 0+ to 1+ conversion.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

Page No. 6

(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

SUBMITTED BY: _____ APSC DOCKET: _____

(Company Address)

SECTION 2

COMPANY RULES AND REGULATIONS

- 2.1 _____ instruments provided local and long distance services. These services shall be available twenty-four (24) hours a day, seven days a week, including holidays.
- A. _____ will ensure that public telephone service meets the guidelines set forth in the Americans with Disabilities Act of 12990 in a manner that is 1) cooperative, 2) consistent, 3) cost effective, and 4) timely.
- 2.2 These services shall be provided in accordance with Alabama Public Service Commission Rules and Regulation and Guidelines pertaining to the provision of customer-owned coin/coinless operated telephone service.
- 2.3 This service is furnished subject to the condition it will not be used for an unlawful purpose. Service may be discontinued if any law enforcement agency, acting within its apparent jurisdiction, advises in writing that such service is being used in violation of law.
- 2.4 Customer-Owned Pat Telephone Equipment
- A. Location of customer-owned pay telephone facilities rests with the company.
- B. Extension stations are not furnished in connection with public telephone service.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

Page No. 7

(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

SUBMITTED BY: _____ APSC DOCKET: _____

(Company Address)

SECTION 2

COMPANY RULES AND REGULATIONS (Cont'd)

- C. In all cases, the company will display information to properly identify the station.
- D. Company will display complete instructions on all instruments.
- E. The payphone must provide the following services free of charge to the caller.
 - 1. Dial tone
 - 2. 911 Access
 - 3. Telecommunications Relay Service for the Hearing impaired.
 - 4. Toll free number to the provider.
 - 5. Toll free for repair or refund service.
 - 6. Toll free to posted carrier.
 - 7. "0" calls for emergencies, call rates, or dialing instructions.
 - 8. "00" calls to posted carrier.

2.5 Semi-Public Telephone Service

- A. Semi-public telephone service is that class of service furnished in locations which in the judgment of the company are reasonably accessible to the public.
- B. Extensions are permissible on semi-public pay telephone service. However, they will not have dialing capabilities. The extension must have an automatic cut-off switch that will prevent unauthorized monitoring or recording of conversations and operate when the pay telephone is busy.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

Page No. 8

(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

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(Company Address)

SECTION 2

COMPANY RULES AND REGULATIONS (Cont'd)

- 2.6 All costs associated with the maintenance and repair of pay telephone service furnished by the company will be borne by the company.
- 2.7 The certificated company will assure that all instrument locations are installed bearing the applicant's company name, address, and telephone number. All calls to the posted company telephone number will be free, and so indicated.
- 2.8 The company will not install facilities that allow automatic acceptance of any call that will allow charges to be placed on the called party's telephone.
- 2.9 The company shall post the name of all carriers and / or operator service providers and dialing instructions on how to contact the posted carrier and operator service provider.
- 2.10 All pay telephone instruments shall accommodate the hearing impaired.
 - A. Twenty-five percent (25%) of installed pay telephone instruments at each location shall be equipped with a volume control (i.e one instrument must be equipped with a volume control, two instruments, one must be equipped with a volume control, three instruments, one must be equipped with a volume control, etc.).

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

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(Company Name)

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(Company Address)

SECTION 2

COMPANY RULES AND REGULATIONS (Cont'd)

2.11 Public Telephone Accessibility Requirements.

- A.** Public telephones shall be installed at a height based on floor space clearance of at least 30 inches by 48 inches allowing for wheelchair accessibility for either forward or parallel approach. Maximum height for parallel approach is 54 inches. Maximum height for forward reach is 48 inches. Measurement is determined by the highest operable part of the public telephone (coin slot).
- B.** Where two or more banks of telephones are installed on a floor, at least one public telephone shall meet the height requirement for a forward reach telephone (48 inches).
- C.** Volume controls must be provided on 25% of the public telephones (minimum of one).
- D.** All public telephones shall be hearing aid compatible.
- E.** Public telephones shall have a cord length of at least 29 inches.

2.12 Text Reader (TDD) Provisioning Requirements.

- A.** If a total of four or more public telephones (interior public telephones or combinations of interior and exterior public telephones) are provided at a site, at least one interior public text reader (TDD) capability shall be provided.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

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(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

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(Company Address)

SECTION 2

COMPANY RULES AND REGULATIONS (Cont'd)

- B.** The customer-owned pay telephone provider shall install and maintain the appropriate international symbols for wheelchair, text-reader, and hearing-loss customers.
- 2.13** All pay telephones will be installed to meet the requirements of the Alabama Public Service Commission.
- 2.14** Inmate Collect Only Pay Telephone Service.

 - A.** Inmate collect only pay telephone service originates from within a federal, city, county, or state confinement facility.
 - B.** Inmate Pay Telephone Accessibility Requirements.

 - 1.** All inmate pay telephones shall be installed at a height based on floor space clearance of at least 30 inches by 48 inches allowing for wheelchair accessibility for either forward or parallel approach. Maximum height for parallel approach is 54 inches. Maximum height for forward reach is 48 inches. Measurement is determined by the highest operable part of the inmate telephone.
 - C.** All inmate pay telephone shall be hearing aid compatible. Inmate pay telephone shall have a cord length of at least 29 inches.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

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(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

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(Company Address)

SECTION 2

COMPANY RULES AND REGULATIONS (Cont'd)

- D.** Text Reader (TDD) Provisioning Requirements.
 - 2.** If a total of four or more inmate collect only pay telephones are provided, at least on instrument shall have text reader (TDD) capability.
- E.** All inmate pay telephones shall be installed to meet the requirements of the Alabama Public Service Commission.
- F.** Provide coinless collect only service to inmates by utilizing up to three coinless telephone instruments per each access line obtained from the appropriate local exchange carrier.
- G.** Customer Owned, Coin-Operated Telephone Service providers serving correctional facilities are allowed to provide coinless telecommunications services to the inmates through the use of special or dedicated access facilities, as authorized in the appropriate local exchange company tariffs, and thereby obtain access other than through the public switched network.
- H.** Prison/Inmate service providers shall suspend service temporally in confinement facilities when such suspension is required by confinement facility administrators.
- I.** The providers of inmate collect only services shall notify the Alabama Public Service Commission, in writing, of the time limitations imposed by each confinement facility served by the pay telephone service providers.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

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(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

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(Company Address)

SECTION 2

COMPANY RULES AND REGULATIONS (Cont'd)

- J.** All Customer Owned-Operated Telephone Service providers serving correctional facilities shall offer free call blocking to those requesting such blocking through correctional facility administrators.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

Page No. 13

(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

SUBMITTED BY: _____ APSC DOCKET: _____

(Company Address)

SECTION 3

DESCRIPTION OF SERVICES

- 3.1 Local Call** – A call made to any number within the local calling area, so designated by the Local Exchange Carrier (LEC).
- 3.2 Directory Assistance** – Customers may reach directory assistance by dialing 1+411 or 1+ Area Code + 555-1212.
- 3.3 One Plus Calling** – Service provided in which a customer can complete an intraLATA, or interLATA call. To initiate a one-plus call, customer dials 1 plus area code and local exchange number of desired party. Customer is then instructed to insert the appropriate amount of change to complete the call. Further instructions may be given to continue the call depending on the length of the call.
- 3.4 Equal Access** – Customers may access an alternate long distance carrier (e.g., MCI, Sprint, etc.) by dialing that carrier’s access code. (There is no charge to the payphone customer for this service.)
- 3.5 Inmate Telephone Services** – COCOT service provided by which a customer can place a local, intrastate intraLATA, and intrastate interLATA call. To initiate a call, a customer dials “0” plus the area code and the local exchange number of desired party. The called party then follows voice prompt instructions to complete the collect call. Call is validated, billed and out cleared through a billing and collections service. The Rates and Charges of an authorized carrier’s approved tariff determines the amount of call.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

Page No. 14

(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

SUBMITTED BY: _____ APSC DOCKET: _____

(Company Address)

SECTION 3

DESCRIPTION OF SERVICE (Cont'd)

- 3.6. _____ uses only an APSC certificated long distance carrier on all payphones installed.
- 3.7. The name of the carrier and operator service provider shall be posted on the telephone along with dialing instructions on how to reach that carrier or operator service provider.
- 3.8. The designated carrier's rates are used for intrastate interLATA calls.
- 3.9. The Local Exchange Carrier (LEC) or an authorized carrier's rates are used for intrastate intraLATA calls from all payphones including inmate collect only service. All intrastate interLATA calls from all payphones including inmate collect only must use the rates of an authorized carrier.
- 3.10. If a time limit is placed on a local call, notice will be posted on the instrument stating the exact limit. A tone will sound 15-30 seconds prior to disconnection. The minimum will be as authorized by the Alabama Public Service Commission.
- 3.11. **Zero Plus Calling** – Service provided in which a customer can complete an intraLATA or interLATA operator assisted call. TO initiate a zero plus call, customer dials "0" plus area code and desired number. Customer is then instructed to dial calling card number or to state type of assistance required.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

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(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

SUBMITTED BY: _____ APSC DOCKET: _____

(Company Address)

SECTION 3

DESCRIPTION OF SERVICE (Cont'd)

3.12. Timing of Calls.

- A.** The customer's long distance usage charge is based on the call duration, time of day, day of week, and mileage. Calls are timed and measured by the customer-owned pay telephone company, the local exchange carrier, or the certificated carrier's facilities.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

Page No. 16

(Company Name)

ISSUE DATE : _____ EFFECTIVE DATE: _____

SUBMITTED BY: _____ APSC DOCKET: _____

(Company Address)

SECTION 4

RATES AND CHARGES

- 4.1. **Local Call** - Charge will be determined by market based pricing and will be on a prepaid basis. Minimum time periods shall be as authorized by the Alabama Public Service Commission.
- 4.2. **Long Distance 1+ Call** – Charge for intrastate interLATA calls shall be the rates of any authorized local exchange carrier or any carrier authorized to provide telecommunications services in Alabama.
 - A. Add the APSC approved operator service charge to each 1+ call. Discounts do not apply to this service.
- 4.3 **Long Distance 0+ Call** – Charges for operator assisted calls will be the same as the local exchange carrier’s approved tariff rate or the designated carrier’s approved tariff rate.
- 4.4 **Directory Assistance Call** – Charge shall be determined by the market.
- 4.5 **Equal Access Call** – There is no charge to dial an access code (10-xxx, 05 1-800 or 1-888) to reach an alternate long distance carrier. Any compensation due to the provider will be paid by the carrier.
- 4.6 On all calls, chargeable time begins when the connection is established between the calling station and the called station.
 - A. Chargeable time ends when either party hangs up.
 - B. There will be no charge for incomplete calls.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

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(Company Name)
ISSUE DATE: _____ EFFECTIVE DATE: _____
SUBMITTED BY: _____ APSC DOCKET: _____

(Company Address)

SECTION 4

RATES AND CHARGES (Cont'd)

**4.7. LONG DISTANCE MESSAGE TELECOMMUNICATIONS
INTRASTATE INTRALATA SERVICE**

_____ concurs with the Long Distance
Message Telecommunications Service Tariff on file with the Commission by
any APSC approved carrier for intraLATA toll service.

**4.8. LONG DISTANCE MESSAGE TELECOMMUNICATIONS
INTRASTATE INTERLATA SERVICE**

A. _____ concurs with the
Long Distance Message Telecommunications Service Tariff filed
with the Commission by any certificated carrier on Intrastate
InterLATA long distance service.

**4.9. OPERATOR ASSISTED LOCAL AND LOCAL CALLING CARD
SERVICE**

A. _____ concurs with the
Operator Assisted Local Calls and Local Calling Card Service
rates, and regulations as filed by local exchange carriers and
approved by the Commission.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

Page No. 18

(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

SUBMITTED BY: _____ APSC DOCKET: _____

(Company Address)

SECTION 5

DISCOUNTS TELECOMMUNICATIONS

5.1. CHARGES FOR LONG DISTANCE TELECOMMUNICATIONS

- A. All intrastate intraLATA long distance charges will incorporate time of day, day of week, and recognized holiday discounts as currently approved by the Alabama Public Service Commission for authorized telecommunications carriers.
- B. All intrastate interLATA long distance charges will incorporate time of day, day of week and recognized holiday reduced rates as currently approved by the Alabama Public Service Commission.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

Page No. 19

(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

SUBMITTED BY: _____ APSC DOCKET: _____

(Company Address)

SECTION 6

INMATE COLLECT ONLY SERVICE

- 6.1.** All intrastate intraLATA long distance rates for inmate collect only service will incorporate time of day, day of week, and recognized holiday discounts for inmate collect service as approved by the Alabama Public Service Commission.

_____ concurs with the intrastate intraLATA long distance discount rates filed with the Alabama Public Service Commission by the authorized telecommunication carrier as they relate to time of day, day of week, and recognized holidays.

- 6.2.** All intrastate interLATA long distance rates for inmate collect only service will incorporate time of day, day of week, and recognized holiday discounts for inmate collect only service as approved by the Alabama Public Service Commission.

_____ concurs with the approved discounted long distance rates on file with the Alabama Public Service Commission for telecommunications carriers as they relate to time of day, and recognized holidays.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

Page No. 20

(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

SUBMITTED BY: _____ APSC DOCKET: _____

(Company Address)

SECTION 7

LIABILITY

- 7.1. The liability of the company for damages arising out of mistakes, omissions, interruptions, delay, errors, or defects in transmission occurring in the course of furnishing service, and no, caused by the negligence of the user, in no event exceeds an amount equivalent to the proportionate charge to the user for the portion of the service during which mistakes, omission, interruptions, delays, errors, or defects in transmission occur.
- 7.2. The company shall be liable for the 0+ to 1+ converted call that is required to contact the called party to determine if the charges will be accepted or refused. This type call originates from store and forward 0+ to 1+ conversion collect only equipment.
- 7.3. The company shall be liable for all automatically accepted calls from automated collect only facilities when no action is taken by the called party, other than the call being answered by an automatic answering device.

CUSTOMER OWNED PAY TELEPHONE SERVICE TARIFF

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(Company Name)

ISSUE DATE: _____ EFFECTIVE DATE: _____

SUBMITTED BY: _____ APSC DOCKET: _____

(Company Address)

SECTION 8

**OPERATOR SERVICES FROM
CUSTOMER-OWNED COIN/COINLESS TELEPHONES**

- 8.1. Operator services will be provided by an APSC approved Operator Serviced Provider (OSP) or an alternate Operator Service Provider (AOS).
- 8.2. Emergency calls shall be routed expeditiously to the local network.
- 8.3. "0" only calls shall be directed only to the local exchange carrier.
- 8.4. Callers shall have access to a live operator (as opposed to a automatic operator) at all times.
- 8.5. The provider shall provide access to the Alabama Relay Center for all customers without charge.
- 8.6. Rates shall be quoted upon request at no charge.
- 8.7. The provider shall identify itself by voice at the beginning of each transaction with a live operator.
- 8.8. The provider shall identify itself by voice during each transaction, before the caller incurs and charges, on automated Operator handled calls.
- 8.9. Where possible, incomplete calls shall not be billed and, when billed, such charges shall be deleted upon the request of a caller.
- 8.10. Provider shall post a notice identifying the provider and its toll free telephone number on the telephone and in plain view.

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SECTION 8

OPERATOR SERVICE FROM
CUSTOMER-OWNED COIN/COINLESS TELEPHONES (Cont'd)

- 8.11.** When another provider is requested by a caller, the call must be returned to the local exchange carrier, transferred to the provider requested, or the caller must be provided the number of the provider requested.
- 8.12.** Provider shall have reasonable procedures for complaints and shall have a toll-free number(s) for complaints and billing inquiries.
- 8.13.** Provider shall have a billing procedure to bill end users for calls no later than sixty (60) days after the call.
- 8.14.** Rates for calls shall be based on direct mileage between the calling and called locations.

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SECTION 9

OPERATOR SERVICES FOR INMATE TELECOMMUNICATIONS SERVICE

- 9.1. Operator services for inmate collect only service will be automated, unless otherwise ordered by the Alabama Public Service Commission.
- 9.2. Provider shall have a billing procedure to bill the called party for calls no later than sixty (60) days after the call.
- 9.3. Rates for calls shall be direct mileage between the calling and called locations.

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SECTION 10

EMERGENCY SERVICE

- 10.1.** If 911 emergency dialing is available, calls will be routed to the proper agency from all instruments without charge.
- 10.2.** If 911 emergency dialing is not available, emergency calls will be routed to the local exchange carrier operator by dialing "0" without charge.