

# TENNESSEE PUBLIC UTILITY COMMISSION



Andrew Jackson Building  
502 Deaderick Street, 4<sup>th</sup> Floor  
Nashville, Tennessee 37243

## 2022-2023 RENEWAL APPLICATION FOR AUTHORITY TO PROVIDE PUBLIC PAYPHONE SERVICE

(Tenn. Comp. R. & Regs. Rule 1220-4-2-.43 to 1220-4-2-.54)

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Company ID Number \_\_\_\_\_ Docket Number \_\_\_\_\_  
(To Be filled out by the TPUC)

### Part I: General Information

Name of Applicant \_\_\_\_\_

Address \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone No: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name and telephone number of contact person authorized to respond to Commission inquiries Monday through Friday:

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Name	Telephone
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Address	City	State	Zip
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Mail the completed renewal application to:

Tennessee Public Utility Commission  
Consumer Services Division  
502 Deaderick Street, 4<sup>th</sup> Floor  
Nashville, TN 37243.

Should you have questions, please contact **Jimmie Hughes at [jimmie.hughes@tn.gov](mailto:jimmie.hughes@tn.gov) or (615) 741-2904.**

Part II Service and Repair

A. Maintenance of Public Payphone (“COCOT”)

(1) How do you intend to service and maintain COCOTS

- \_\_\_\_\_ Personally
- \_\_\_\_\_ Full time Technician
- \_\_\_\_\_ Part Time Technician
- \_\_\_\_\_ Service/repair contract with 3<sup>rd</sup> party

(2) Identify names and qualifications of the party/parties responsible for service and repair.

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Part III Display Card

Attach a copy of the display card posted on the pay telephone. This card must contain all required information listed in the attached Tenn. Comp. R. & Regs. 1220-4-2-.49 (1)(f):

- A. The charge and operating instructions.
- B. Long Distance Carrier, Address, and 800 Number must be on the card.
- C. Company Name, Address, Phone Number with a place for your TPUC ID Number.
- D. Information for using Long Distance, (0+Area Code + Number – within this Area Code and Outside this Area Code.
- E. Information for Collect Calls, Person-To-Person Calls, and Station-To-Station Calls.
- F. Directory Assistance (Local Calling Area) Outside Calling Area (411 or 1+411)
- G. Emergency Help (Dial)
- H. Dial \_\_\_\_\_ for Refund (Or indicate how you handle refunds)
- I. Free Calls – Toll Free 800 or 888 numbers, Repair Service. (This Instrument is serviced by: Name & Address and telephone number of Service Technician).
- J. Method of service provided—One-way (outbound calls only) or Two-way service

Attach a copy of the Display Card in this space:

**Part VI Rule Compliance Agreement**

- A. The Customer Owned Coin or Coinless Operated Telephone (“COCOT”) renewal authorization applicant, hereby, affirms the following:
- I have received, read and understands the Tennessee Public Utility Commission’s Public Payphone Service Rules and Regulations;
  - I understands the penalties for non-compliance with these rules and regulations;
  - I recognize all associated fees to provide Payphone Service, including the fee assessed for additional Payphone instruments;
  - I will comply with the TPUC Payphone Service Rules and all applicable state laws;
  - I will submit a monthly report to the TPUC indicating any COCOT additions accompanied with the proper fee;
  - All information provided in the attached COCOT registration document is true to the best of applicant’s knowledge.

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Applicant Signature

Date

# MONTHLY REPORT OF NEW COCOT ADDITIONS

**If you have any questions call (615)741-2904**

COMPANY NAME \_\_\_\_\_

AUTHORIZATION NUMBER \_\_\_\_\_

ADDRESS \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

**COCOT NUMBER _____	LEC _____	EXG _____
LOCATION _____	If no physical address, use building name, cross streets, etc.	
ADDRESS _____	COUNTY _____	
CITY _____	STATE _____	ZIP _____ FCC NUMBER _____
UNDERLYING CARRIER(S) FOR BOTH LOCAL & LONG DISTANCE SERVICE _____		
INSTALLATION DATE _____ Circle if one (1) way or two (2) way service is provided		
MANUFACTURER'S NAME & MODEL NUMBER _____		
**COCOT NUMBER _____	LEC _____	EXG _____
LOCATION _____	If no physical address, use building name, cross streets, etc.	
ADDRESS _____	COUNTY _____	
CITY _____	STATE _____	ZIP _____ FCC NUMBER _____
UNDERLYING CARRIER(S) FOR BOTH LOCAL & LONG DISTANCE SERVICE _____		
INSTALLATION DATE _____ Circle if one (1) way or two (2) way service is provided		
MANUFACTURER'S NAME & MODEL NUMBER _____		

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UNDERLYING CARRIER(S) FOR BOTH LOCAL & LONG DISTANCE SERVICE _____		
INSTALLATION DATE _____ Circle if one (1) way or two (2) way service is provided		
MANUFACTURER'S NAME & MODEL NUMBER _____		

The report, along with the check for \$10.00 per new Payphone, is due by the 10<sup>th</sup> of each month.  
Mail to: Tennessee Public Utility Commission, Consumer Services Division, 502 Deaderick Street, 4th Floor,  
Nashville, TN 37243. If you have any questions, contact **Jimmie Hughes at [jimmie.hughes@tn.gov](mailto:jimmie.hughes@tn.gov)**.