



Tennessee Public Utility Commission
502 Deaderick Street, 4th Floor
Nashville, TN 37243

Telephone Solicitor Registration Application

Application is hereby made to obtain access to the Tennessee "Do-Not-Call Register" pursuant to TPUC Rule 1220-4-11-.04. Registration submitted for **July 1, 2022 – June 30, 2023**. Please print or type the information requested below.

TPUC ID (if assigned) _____ Check one: New Registration Re-registering

TAX ID (last 5 digits) _____

Legal Name of Corporation, Partnership, or Proprietorship _____

Business or Individual Name used when contacting the public. Trade name(s), assumed name(s) or fictitious names used. _____

Nature of Business _____

This registration is for: Standard Registration Principal Solicitor (mark one with X)

E-mail Address for Delivery of the DNC List: _____

Contact Person for Inquiries from the TPUC: This is the only person authorized to make changes to your company information and is responsible for keeping all application information correct and **updated**. Mailing address for contact must be within US borders; phone numbers must be US area codes or toll free numbers.

Phone # _____ Fax # _____ E-mail Address _____

Contact Name	Address	City	State	Zip Code
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Person authorized to respond to notices of alleged violations from TPUC:

Phone # _____ Fax # _____ E-mail Address _____

Name of Authorized Person	Address	City	State	Zip Code
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Is applicant utilizing ADADs or predictive dialers for calls originating or terminating in Tennessee? **Yes** _____ **No** _____

Provide the telephone number(s) for responding to inquiries relative to the telephone solicitation during hours when telephone solicitations are being made. **Toll Free:**

Provide name, address and telephone number of Telemarketer(s) if your telemarketing is being outsourced:

Name of Company	Contact Person	Address	City	State	Phone #
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Provide the contact information of the Registered Agent for Service of Process. (They must be located in Tennessee.)

Name	Address	City	State	Zip Code	Phone #	Email
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On a separate sheet of paper marked as Supplemental Attachment, list the name, address and telephone number of all subsidiaries and affiliate companies associated with your company which will have access to your Do-Not-Call Register. An affiliate company is one that your company effectively controls because of its ownership interest. A subsidiary company is one in which your company owns more than 50% of the voting shares.

FEE: PLEASE OBTAIN A TRACKING NUMBER FROM YOUR DELIVERY SERVICE WHEN SUBMITTING FEES BY MAIL

1. Payments can be made online through either e-check or credit card (vendor processing fees will be applicable). A receipt will be generated upon payment based on your responses for solicitor type and the number of independent solicitors selected.
 2. You may also remit payment by mail. If you marked standard registration, mail the completed original application including a check for \$500.00 to: Tennessee Public Utility Commission, Attn: Jimmie Hughes, 502 Deaderick Street, 4th Floor, Nashville, TN 37243.
 3. If you marked Principal Solicitor, mail the completed original application including a check in the amount of \$1,000.00 and an additional \$50.00 for each independent solicitor listed on the Supplemental Attachment 2 to: Tennessee Public Utility Commission, Attn: Jimmie Hughes, 502 Deaderick Street, 4th Floor, Nashville, TN 37243.
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Compliance Statement

The Tennessee “Do-Not-Call Register” telephone solicitor applicant, hereby, affirms the following:

I/We will comply with the Tennessee Public Utility Commission’s (“TPUC”) Rules and Regulations Chapter 1220-4-11 and all other applicable state laws, including but not limited to T.C.A. Section 65-4-401, *et seq.*

I/We will notify the Tennessee Public Utility Commission within thirty (30) days of any material change relative to this application or the information contained therein.

Having been duly sworn, and under the penalties of perjury, I hereby certify that the representations in the APPLICATION and all attachments are true and correct to the best of my knowledge and belief.

_____ NAME OF APPLICANT - COMPANY NAME	_____ SIGNATURE
	_____ PRINTED NAME
	_____ TITLE

Subscribed and sworn to or affirmed before me, this _____ day of _____, _____
Day Month Year

Known to be the person named in, and who executed the foregoing application.

My commission expires on _____.

Signature of Notary and Authorized Official

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Additional information on the Do-Not-Call Program, including a copy of the Program’s Rules and Regulations, can be obtained from www.tn.gov/tpuc. All questions regarding the information on this application should be referred to Jimmie Hughes at (615) 741-2904.