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FLORIDA PUBLIC SERVICE COMMISSION

OFFICE OF TELECOMMUNICATIONS

COMMISSION
CLERK

APPLICATION FORM

FOR

AUTHORITY TO PROVIDE TELECOMMUNICATIONS COMPANY SERVICE WITHIN THE STATE OF FLORIDA

Instructions


- A. This form is used as an application for an original certificate and for approval of transfer of an existing certificate. In the case of a transfer, the information provided shall be for the transferee (See Page 8).
- B. Print or type all responses to each item requested in the application. If an item is not applicable, please explain.
- C. Use a separate sheet for each answer which will not fit the allotted space.
- D. Once completed, submit the original and one copy of this form along with a non-refundable application fee of **\$500.00** to:

**Florida Public Service Commission
Office of Commission Clerk
2540 Shumard Oak Blvd.
Tallahassee, Florida 32399-0850
(850) 413-6770**

- E. A filing fee of **\$500.00** is required for the transfer of an existing certificate to another company.
- F. If you have questions about completing the form, contact:

**Florida Public Service Commission
Office of Telecommunications
2540 Shumard Oak Blvd.
Tallahassee, Florida 32399-0850
(850) 413-6600**

Check received with filing and forwarded
to Fiscal for deposit. Fiscal to forward
deposit information to Records.

Initials of person who forwarded check:


COM _____
AFD _____
APA _____
ECO _____
ENG _____
GCL _____
IDM _____
TEL _____
CLK NG

1. This is an application for (check one):

Original certificate (new company).

Approval of transfer of existing certificate: Example, a non-certificated company purchases an existing company and desires to retain the original certificate of authority rather than apply for a new certificate.

2. Name of company: TDS Metrocom, LLC

3. Name under which applicant will do business (fictitious name, etc.):

TDS Metrocom, LLC

4. Official mailing address:

Street/Post Office Box: 525 Junction Road
City: Madison
State: WI
Zip: 53717

5. Florida address:

Street/Post Office Box: 107 W. Franklin St., P.O. Box 189
City: Quincy,
State: FL
Zip: 32351-0189

6. Structure of organization:

- | | | | |
|--------------------------|------------------------|-------------------------------------|---------------------|
| <input type="checkbox"/> | Individual | <input checked="" type="checkbox"/> | Corporation |
| <input type="checkbox"/> | Foreign Corporation | <input type="checkbox"/> | Foreign Partnership |
| <input type="checkbox"/> | General Partnership | <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Other, please specify: | | |

If individual, provide:

Name: _____
Title: _____
Street/Post Office Box: _____
City: _____
State: _____
Zip: _____
Telephone No.: _____
Fax No.: _____
E-Mail Address: _____
Website Address: _____

7. **If incorporated in Florida**, provide proof of authority to operate in Florida. The Florida Secretary of State corporate registration number is: M13000003579
8. **If foreign corporation**, provide proof of authority to operate in Florida. The Florida Secretary of State corporate registration number is:
9. **If using fictitious name (d/b/a)**, provide proof of compliance with fictitious name statute (Chapter 865.09, FS) to operate in Florida. The Florida Secretary of State fictitious name registration number is:
10. **If a limited liability partnership**, please proof of registration to operate in Florida. The Florida Secretary of State registration number is:
11. **If a partnership**, provide name, title and address of all partners and a copy of the partnership agreement.

Name: _____
Title: _____
Street/Post Office Box: _____
City: _____
State: _____
Zip: _____
Telephone No.: _____
Fax No.: _____
E-Mail Address: _____
Website Address: _____

12. **If a foreign limited partnership**, provide proof of compliance with the foreign limited partnership statute (Chapter 620.169, FS), if applicable. The Florida registration number is:

13. Provide **F.E.I. Number**: 39-1879010

14. Who will serve as liaison to the Commission in regard to the following?

(a) The application:

Name: Joel Dohmeier
Title: Vice President
Street Name & Number: 525 Junction Road
Post Office Box: _____
City: Madison
State: WI
Zip: 53717
Telephone No.: 608-664-4168
Fax No.: 608-830-5570
E-Mail Address: Joel.dohmeier@tdstelecom.com
Website Address: www.tdstelecom.com

(b) Official point of contact for the ongoing operations of the company:

Name: Tom McCabe
Title: State Government Affairs Manager
Street Name & Number: 107 W. Franklin St.
Post Office Box: _____
City: Quincy
State: FL
Zip: 32351-0189
Telephone No.: 850-875-5207
Fax No.: 850-875-5225
E-Mail Address: Thomas.mccabe@tdstelecom.com
Website Address: www.tdstelecom.com

(c) Where will you officially designate as your place of publicly publishing your schedule (a/k/a tariffs or price lists)?

- Florida Public Service Commission
- Website – Website address: www.tdstelecom.com
- Other – Please provide address:

15. List the states in which the applicant:

(a) has operated as a telecommunications company.

Illinois; Michigan; Minnesota; New York; Wisconsin

(b) has applications pending to be certificated as a telecommunications company.

Intend to apply for certification in more states in the future.

(c) is certificated to operate as a telecommunications company.

Illinois; Indiana; Michigan; Minnesota; New York; Ohio; Wisconsin

(d) has been denied authority to operate as a telecommunications company and the circumstances involved.

None.

(e) has had regulatory penalties imposed for violations of telecommunications statutes and the circumstances involved.

On November 15, 2012, TDS Telecommunications Corporation entered into a Consent Decree (DA 12-1832) with the Federal Communications Commission regarding an investigation of TDS Telecom's compliance with Section 222(c)(1) of the Communications Act of 1934, as amended and Section 64.2007 of the Commission's Rules. The Consent Decree applies to TDS Metrocom, a wholly-owned subsidiary of TDS Telecommunications Corporation. The Company made a voluntary contribution to the US Treasury and has implemented a compliance plan. This was a self-reported finding which indicated that some customers may have received unwanted product advertisements. At no time did any proprietary customer information become disclosed. Moreover, the Company received no customer complaints related to this oversight.

(f) has been involved in civil court proceedings with another telecommunications entity, and the circumstances involved.

None.

16. Have any of the officers, directors, or any of the ten largest stockholders previously been:

(a) adjudged bankrupt, mentally incompetent (and not had his or her competency restored), or found guilty of any felony or of any crime, or whether such actions may result from pending proceedings. Yes No

If yes, provide explanation. None.

(b) granted or denied a certificate in the State of Florida (this includes active and canceled certificates). Yes No

If yes, provide explanation and list the certificate holder and certificate number.

Certified in the State of Florida:

- (1). TDS Telecom is the holding company of Quincy Telephone Company, d/b/a TDS Telecom – Quincy (TL718).
- (2). TDS Long Distance Corporation (7555)

(c) an officer, director, partner or stockholder in any other Florida certificated or registered telephone company. Yes No

If yes, give name of company and relationship. If no longer associated with company, give reason why not.

Quincy Telephone Company and TDS Long Distance Corporation are wholly owned subsidiaries of TDS Telecommunications Corporation. TDS Telecommunication Corporation is a wholly-owned subsidiary of Telephone and Data Systems, Inc.

17. Submit the following:

(a) **Managerial capability:** resumes of employees/officers of the company that would indicate sufficient managerial experiences of each. Please explain if a resume represents an individual that is not employed with the company and provide proof that the individual authorizes the use of the resume.

(b) **Technical capability:** resumes of employees/officers of the company that would indicate sufficient technical experiences or indicate what company has been contracted to conduct technical maintenance. Please explain if a resume represents an individual that is not employed with the company and provide proof that the individual authorizes the use of the resume.

(c) **Financial Capability:** applicant's audited financial statements for the most recent three (3) years. If the applicant does not have audited financial statements, it shall so be stated. Unaudited financial statements should be signed by the applicant's chief executive officer and chief financial officer affirming that the financial statements are true and correct and should include:

1. the balance sheet,
2. income statement, and
3. statement of retained earnings.

TDS Metrocom LLC, the current applicant, is a wholly owned subsidiary of TDS Telecommunications Corporation. The financial statements are for the parent company Telephone and Data Systems Inc, a publicly traded company.

Note: *It is the applicant's burden to demonstrate that it possesses adequate managerial capability, technical capability, and financial capability. Additional supporting information can be supplied at the discretion of the applicant.*

TDS Metrocom LLC

Application to Provide Telecommunications Service in the State of Florida

Managerial capability; give resumes of employees/officers of the company that would indicate sufficient managerial experiences of each.

The officers of TDS Metrocom, LLC are employees of TDS TELECOM, INC. Below is a list of the officers of the TDS Telecom, Inc. All the officers have been employed at TDS TELECOM for at least the past eight years and have a combined total of over 100 years in the telecommunications industry.

TDS TELECOM is a holding company for 106 local exchange carriers located in 28 states. TDS TELECOM was formed in 1969.

David A. Wittwer
President & CEO

James W. Butman
Vice President

Vicki L. Villacrez
Secretary/Treasurer

Irmgard Metz
Assistant Secretary

Stephen P. Fitzell
Assistant Secretary

David P. Jones
Assistant Treasurer

TDS Metrocom LLC

**Application to Provide Telecommunications Service in the State of
Florida**

Technical capability; give resumes of employees/officers of the company that would indicate sufficient technical experiences of each.

Please see response to managerial capability question above.

TDS Metrocom LLC

**Application to Provide Telecommunications Service in the State of
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Financial capability; applicant's audited financial statements for the most recent three (3) years.

Please see TDS' financial statements for 2010, 2011, and 2012 at the following website:

www.last10k.com/sec-filings/ticker/tds

THIS PAGE MUST BE COMPLETED AND SIGNED

REGULATORY ASSESSMENT FEE: I understand that all telephone companies must pay a regulatory assessment fee. Regardless of the gross operating revenue of a company, a minimum annual assessment fee, as defined by the Commission, is required.

RECEIPT AND UNDERSTANDING OF RULES: I acknowledge receipt and understanding of the Florida Public Service Commission's rules and orders relating to the provisioning of telecommunications company service in Florida.


APPLICANT ACKNOWLEDGEMENT: By my signature below, I, the undersigned officer, attest to the accuracy of the information contained in this application and attached documents and that the applicant has the technical expertise, managerial ability, and financial capability to provide telecommunications company service in the State of Florida. I have read the foregoing and declare that, to the best of my knowledge and belief, the information is true and correct. I attest that I have the authority to sign on behalf of my company and agree to comply, now and in the future, with all applicable Commission rules and orders.

Further, I am aware that, pursuant to Chapter 837.06, Florida Statutes, "**Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082 and s. 775.083.**"

I understand that any false statements can result in being denied a certificate of authority in Florida.

COMPANY OWNER OR OFFICER

Print Name: Joel Dohmeier
Title: Vice President
Telephone No.: 608-664-4168
E-Mail Address: Joel.dohmeier@tdstelecom.com

Signature:  Date: 7/15/2013