

State of Florida



# Public Service Commission

CAPITAL CIRCLE OFFICE CENTER • 2540 SHUMARD OAK BOULEVARD  
TALLAHASSEE, FLORIDA 32399-0850

**-M-E-M-O-R-A-N-D-U-M-**

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**DATE:** July 5, 2018  
**TO:** Carlotta S. Stauffer, Commission Clerk, Office of Commission Clerk  
**FROM:** Samantha Cibula, Office of the General Counsel *S.M.C.*  
**RE:** Docket No. 20090504-TP

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Please file the attached materials in the docket file listed above.

Thank you.

Attachment

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COMMISSION  
CLERK

COMMISSIONERS:  
NANCY ARGENZIANO, CHAIRMAN  
LISA POLAK EDGAR  
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STATE OF FLORIDA



OFFICE OF THE GENERAL COUNSEL  
S. CURTIS KISER  
GENERAL COUNSEL  
(850) 413-6199

## Public Service Commission

March 11, 2010

Brian T. Moore, Chief Attorney  
Joint Administrative Procedures Committee  
Room 120, Holland Building  
Tallahassee, FL 32399-1300

**Re: Public Service Commission Proposed Rule 25-4.0665 (Docket No. 090504-TP)**

Dear Mr. Moore:

Thank you for your letters of December 23, 2009, and January 21, 2010, in which you offer comments and questions regarding the Commission's proposed amendment to Rule 25-4.0665. Please be advised that in response to your letters, the Commission is scheduled to consider making certain changes to the proposed rule and to the forms referenced therein at its April 20, 2010, agenda conference. Also at that agenda conference, the Commission will consider the comments filed by certain telecommunications companies affected by the rule. Notice of the agenda conference/hearing was published in the March 5, 2010, edition of the Florida Administrative Weekly.

In your December 23, 2009, letter, you ask whether a person receiving assistance from a Bureau of Indian Affairs program qualifies for Lifeline service. The Commission staff will recommend to the Commission that language be added as 25-4.0665(2) of the proposed rule to specify that such persons do qualify for Lifeline assistance. All subsequent paragraphs of the proposed rule have been renumbered accordingly. Please see the attached revisions to the proposed rule for the language that staff intends to recommend for the Commission's approval in this regard.

Also in your December 23, 2009, letter, you ask why it is necessary to incorporate by reference 42 USC §1437f (Section 8 housing) in 25-4.0665(1)(a)5 of the proposed rule. The Commission staff agrees that it is unnecessary to incorporate that federal act by reference, and we will recommend to the Commission that the reference be removed. This change is incorporated in the attached revisions to the proposed rule that the staff intends to recommend for the Commission's approval.

In your January 21, 2010, letter, you ask why 25-4.0665(1)(b) of the proposed rule provides that a subscriber is eligible for Lifeline service if his or her eligible telecommunications carrier has more than one million access lines and the household income is at or below 150% of the poverty line, while the form provides only that this person "may be able to qualify." You also inquire about the Office of Public Counsel's role in this process, and the procedures to be followed by carriers with less than one million access lines that voluntarily elect to enroll Lifeline applicants based on their household income under the newly renumbered 25-4.0665(3) of the proposed rule.

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Internet E-mail: [contact@psc.state.fl.us](mailto:contact@psc.state.fl.us)

Subsection 364.10(3)(a), Florida Statutes, provides that eligible telecommunications carriers that have more than one million access lines shall provide Lifeline service to persons who meet an income eligibility test at 150 percent or less of the federal poverty income guidelines for Lifeline customers. That subsection also provides that “[t]he Office of Public Counsel shall certify and maintain claims submitted by a customer for eligibility under the income test authorized by this subsection.” Subsection 364.10(3)(a), Florida Statutes, does not authorize the Commission to require carriers with less than one million access lines to provide Lifeline service. Therefore, the proposed rule does not place any limitations on those carriers that elect to provide Lifeline service on a voluntary basis.

The Commission staff will propose that the Commission modify the language of the forms referenced in the rule to clarify that: 1) customers who are at or below 150% of the federal poverty level and who receive service from AT&T Florida, CenturyLink, or Verizon, which carriers have more than one million access lines, do qualify for Lifeline service; 2) those customers may demonstrate their eligibility for Lifeline service to the Office of Public Counsel; and 3) customers of other service providers who are at or below 150% of the federal poverty level should contact their service provider to see if their service provider is voluntarily enrolling Lifeline applicants through the income eligibility test. Please see the attached forms for the modified language that staff intends to recommend for the Commission’s consideration in this regard.

If you have any further questions or concerns, please do not hesitate to contact me.

Sincerely,



Rosanne Gervasi  
Associate General Counsel

RG: md

I:\Lifeline rule\090504 letter to JAPC.rg.doc

1 25-4.0665 Lifeline Service

2 (1) A subscriber is eligible for Lifeline service if:

3 (a) the subscriber is a participant in one of the following federal assistance programs:

4 1. Medicaid;

5 2. Food Stamps;

6 3. Supplemental Security Income (SSI);

7 4. Temporary Assistance for Needy Families/Temporary Cash Assistance;

8 5. "Section 8" Federal Public Housing Assistance (42 U.S.C. sec. 1437f (2009), which  
9 is incorporated herein by reference);

10 6. Low-Income Home Energy Assistance Program; or

11 7. The National School Lunch Program – Free Lunch; or

12 (b) the subscriber's eligible telecommunications carrier has more than one million  
13 access lines and the subscriber's household income is at or below 150 percent of the federal  
14 poverty income guidelines.

15 ~~An eligible telecommunications carrier must provide 60 days written notice prior to the~~  
16 ~~termination of Lifeline service. The notice of pending termination shall contain the telephone~~  
17 ~~number at which the subscriber can obtain information about the subscriber's Lifeline service~~  
18 ~~from the eligible telecommunications carrier. The notice shall also inform the subscriber of the~~  
19 ~~availability, pursuant to Section 364.105, F.S., of discounted residential basic local~~  
20 ~~telecommunications service.~~

21 (2) A subscriber living on federally recognized Tribal lands who does not satisfy the  
22 eligibility requirements for Lifeline service in subsection (1) of this rule is nevertheless  
23 eligible for Lifeline service if the subscriber receives benefits from one of the following  
24 Bureau of Indian Affairs programs:

25

CODING: Words underlined are additions; words in ~~struck through~~ type are deletions from existing law.

- 1           (a) Tribal temporary assistance for needy families (TANF);  
2           (b) NSL Program – Free Lunch; or  
3           (c) Head Start.

4 ~~If a subscriber's Lifeline service is terminated and the subscriber subsequently presents proof~~  
5 ~~of Lifeline eligibility, the eligible telecommunications carrier shall reinstate the subscriber's~~  
6 ~~Lifeline service as soon as practicable, but no later than 60 days following receipt of proof of~~  
7 ~~eligibility. Irrespective of the date on which the eligible telecommunications carrier reinstates~~  
8 ~~the subscriber's Lifeline service, the subscriber's bill shall be credited for Lifeline service as~~  
9 ~~of the date the eligible telecommunications carrier received the proof of continued Lifeline~~  
10 ~~eligibility.~~

11           (3) Eligible telecommunications carriers with less than one million access lines are not  
12 required to enroll Lifeline applicants through the income eligibility test of 150 percent or less  
13 of the federal poverty income guidelines, but may do so voluntarily. All eligible  
14 telecommunications carriers shall participate in the Lifeline service Automatic Enrollment  
15 Process. For purposes of this rule, the Lifeline service Automatic Enrollment Process is an  
16 electronic interface between the Department of Children and Family Services, the  
17 Commission, and the eligible telecommunications carrier that allows low-income individuals  
18 to automatically enroll in Lifeline following enrollment in a qualifying public assistance  
19 program.

20           ~~(a) The Commission shall send an e-mail to the eligible telecommunications carrier~~  
21 ~~informing the eligible telecommunications carrier that Lifeline service applications are~~  
22 ~~available for retrieval for processing.~~

23           ~~(b) The eligible telecommunications carrier shall enroll the subscriber in the Lifeline~~  
24 ~~service program as soon as practicable, but no later than 60 days from the receipt of the e-mail~~

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1 notification. Upon completion of initial enrollment, the eligible telecommunications carrier  
2 shall credit the subscriber's bill for Lifeline service as of the date the eligible  
3 telecommunications carrier received the e-mail notification from the Commission.

4 (c) ~~The eligible telecommunications carrier shall maintain a current e-mail address~~  
5 ~~with the Commission, which the Commission will use to inform the eligible~~  
6 ~~telecommunications carrier that new Lifeline service applications are available for retrieval for~~  
7 ~~processing.~~

8 (d) ~~The eligible telecommunications carrier shall maintain with the Commission the~~  
9 ~~names, e-mail addresses and telephone numbers of one primary and one secondary company~~  
10 ~~representative who will manage the user accounts on the Commission's secure website.~~

11 (e) ~~Within 20 calendar days of receiving the Commission's e-mail notification that the~~  
12 ~~Lifeline service application is available for retrieval, the eligible telecommunications carrier~~  
13 ~~shall provide a facsimile response to the Commission via the Commission's dedicated Lifeline~~  
14 ~~service facsimile telephone line at (850)413-7142, identifying the customer name, address,~~  
15 ~~telephone number, and date of the application for:~~

16 1. ~~Misdirected Lifeline service applications;~~

17 2. ~~Applications for customers currently receiving Lifeline service; and~~

18 3. ~~Rejected applicants, which shall include the reason(s) why the applicants were~~  
19 ~~rejected.~~

20 ~~In lieu of a facsimile, the eligible telecommunications carrier may file the information with the~~  
21 ~~Office of Commission Clerk.~~

22 (f) ~~Pursuant to Section 364.107(1), F.S., information filed by the eligible~~  
23 ~~telecommunications carrier in accordance with paragraph (3)(e) of this rule is confidential and~~  
24 ~~exempt from Section 119.07(1), F.S. However, the eligible telecommunications carrier may~~

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1 ~~disclose such information consistent with the criteria in Section 364.107(3)(a), F.S. For~~  
2 ~~purposes of this rule, the information filed by the eligible telecommunications carrier will be~~  
3 ~~presumed necessary for disclosure to the Commission pursuant to the criteria in Section~~  
4 ~~364.107(3)(a)4., F.S.~~

5 (4) Eligible telecommunications carriers that charge an initial connection charge must  
6 offer Link-Up service to subscribers who are eligible for Lifeline service pursuant to this rule.  
7 ~~All eligible telecommunications carriers shall provide current Lifeline service company~~  
8 ~~information to the Universal Service Administrative Company (USAC) at~~  
9 ~~www.lifelinesupport.org so that the information can be posted on the USAC's consumer~~  
10 ~~website.~~

11 (5) When enrolling customers in the Lifeline service program under subsection (1)(a)  
12 of this rule, eligible telecommunications carriers shall accept Form PSC/RAD 157 (XX/XX),  
13 entitled "Application for Link-Up Florida and Lifeline Assistance," which is incorporated into  
14 this rule by reference and can be accessed from the Commission's website at  
15 www.floridapsc.com, by selecting "Link-Up Florida and Lifeline," then selecting "Need  
16 Discounted Phone Service?," and then selecting "English Link-Up and Lifeline Certification  
17 Form" (also available in Spanish and Creole).

18 (6) Eligible telecommunications carriers shall enroll customers for Lifeline service  
19 who electronically submit Form PSC/RAD 158 (XX/XX), entitled "Lifeline and Link-Up  
20 Florida On-line Self Certification Form," which is incorporated into this rule by reference and  
21 can be accessed from the Commission's website at www.floridapsc.com, by selecting "Link-  
22 Up Florida and Lifeline," then selecting "Apply On-line."

23 (7) For Lifeline applicants who do not use On-line enrollment or simplified  
24 certification enrollment, the eligible telecommunications carrier must accept Public Assistance  
25

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1 eligibility determination letters, including those provided for food stamps, Medicaid, and  
2 public housing lease agreements, as proof of eligibility for Link-Up and Lifeline enrollment.

3 (8) Eligible telecommunications carriers must allow customers the option to submit  
4 Link-Up or Lifeline applications via U.S. Mail or facsimile, and may allow applications to be  
5 submitted electronically. Eligible telecommunications carriers must also allow customers the  
6 option to submit copies of supporting documents via U.S. Mail or facsimile.

7 (9) Eligible telecommunications carriers shall only require a customer to provide the  
8 last four digits of the customer's social security number for application for Lifeline and Link-  
9 Up service and to verify continued eligibility for the programs as part of the annual  
10 verification process.

11 (10) All eligible telecommunications carriers shall participate in the Lifeline service  
12 Automatic Enrollment Process. For purposes of this rule, the Lifeline service Automatic  
13 Enrollment Process is an electronic interface between the Department of Children and Family  
14 Services, the Commission, and the eligible telecommunications carrier that allows low-income  
15 individuals to automatically enroll in Lifeline following enrollment in a qualifying public  
16 assistance program.

17 (a) The Commission shall send an e-mail to the eligible telecommunications carrier  
18 informing the eligible telecommunications carrier that Lifeline service applications are  
19 available for retrieval for processing.

20 (b) The eligible telecommunications carrier shall enroll the subscriber in the Lifeline  
21 service program as soon as practicable, but no later than 60 days from the receipt of the e-mail  
22 notification. Upon completion of initial enrollment, the eligible telecommunications carrier  
23 shall credit the subscriber's bill for Lifeline service as of the date the eligible  
24 telecommunications carrier received the e-mail notification from the Commission.

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1           (c) The eligible telecommunications carrier shall maintain a current e-mail address  
2 with the Commission, which the Commission will use to inform the eligible  
3 telecommunications carrier of the Commission's Lifeline secure website address and that new  
4 Lifeline service applications are available for retrieval for processing.

5           (d) The eligible telecommunications carrier shall maintain with the Commission the  
6 names, e-mail addresses and telephone numbers of one primary and one secondary company  
7 representative who will manage the user accounts on the Commission's Lifeline secure  
8 website.

9           (e) Within 20 calendar days of receiving the Commission's e-mail notification that the  
10 Lifeline service application is available for retrieval, the eligible telecommunications carrier  
11 shall provide a facsimile response to the Commission via the Commission's dedicated Lifeline  
12 service facsimile telephone line at (850)413-7142, or an electronic response via the  
13 Commission's Lifeline secure website, identifying the customer name, address, telephone  
14 number, and date of the application for:

15           1. Misdirected Lifeline service applications;

16           2. Applications for customers currently receiving Lifeline service; and

17           3. Rejected applicants, which shall include the reason(s) why the applicants were  
18 rejected.

19 In lieu of a facsimile or electronic submission, the eligible telecommunications carrier may  
20 file the information with the Office of Commission Clerk.

21           (f) Pursuant to Section 364.107(1), F.S., information filed by the eligible  
22 telecommunications carrier in accordance with paragraph (9)(e) of this rule is confidential and  
23 exempt from Section 119.07(1), F.S. However, the eligible telecommunications carrier may  
24 disclose such information consistent with the criteria in Section 364.107(3)(a), F.S. For  
25

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1 purposes of this rule, the information filed by the eligible telecommunications carrier will be  
2 presumed necessary for disclosure to the Commission pursuant to the criteria in Section  
3 364.107(3)(a)4., F.S.

4 (11) An eligible telecommunications carrier shall not impose additional verification  
5 requirements on subscribers beyond those which are required by this rule.

6 (12) If the Office of Public Counsel certifies a subscriber eligible to receive Lifeline  
7 service under the income test set forth in Section 364.10(3)(a), F.S., an eligible  
8 telecommunications carrier shall not impose any additional verification requirements on the  
9 subscriber.

10 (13) An eligible telecommunications carrier must provide written notice to a customer  
11 within 30 days of receipt of the application providing the reason for a rejected Lifeline  
12 application, and providing contact information for the customer to get information regarding  
13 the application denial.

14 (14) An eligible telecommunications carrier must provide 60 days written notice prior  
15 to the termination of Lifeline service. The notice of pending termination shall contain the  
16 telephone number at which the subscriber can obtain information about the subscriber's  
17 Lifeline service from the eligible telecommunications carrier. The notice shall also inform the  
18 subscriber of the availability, pursuant to Section 364.105, F.S., of discounted residential basic  
19 local telecommunications service.

20 (15) If a subscriber's Lifeline service is terminated and the subscriber subsequently  
21 presents proof of Lifeline eligibility, the eligible telecommunications carrier shall reinstate the  
22 subscriber's Lifeline service as soon as practicable, but no later than 60 days following receipt  
23 of proof of eligibility. Irrespective of the date on which the eligible telecommunications  
24 carrier reinstates the subscriber's Lifeline service, the subscriber's bill shall be credited for  
25

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1 Lifeline service as of the date the eligible telecommunications carrier received the proof of  
2 continued Lifeline eligibility.

3 (16) All eligible telecommunications carriers shall provide current Lifeline service  
4 company information to the Universal Service Administrative Company at  
5 www.lifelinesupport.org so that the information can be posted on the Universal Service  
6 Administrative Company's consumer website.

7 (17) Eligible telecommunications carriers must advertise the availability of Lifeline  
8 service to those who may be eligible for the service. At a minimum, if the eligible  
9 telecommunications carrier publishes a directory, the eligible telecommunications carrier must  
10 include in the index of the directory a notice of the availability of Lifeline service. If the  
11 eligible telecommunications carrier generates customer bills, the eligible telecommunications  
12 carrier must also place an insert in the subscriber's bill or a message on the subscriber's bill at  
13 least once each calendar year advising subscribers of the availability of Lifeline service.

14 (18) Eligible telecommunications carriers may not charge a service deposit in order to  
15 initiate Lifeline service if the subscriber voluntarily elects toll blocking or toll limitation. If the  
16 subscriber elects not to place toll blocking on the line, an eligible telecommunications carrier  
17 may charge a service deposit.

18 (19) Eligible telecommunications carriers may not charge Lifeline subscribers a  
19 monthly number-portability charge.

20 (20) Eligible telecommunications carriers offering Link-Up and Lifeline service must  
21 submit quarterly reports to the Commission no later than 30 days following the ending of each  
22 quarter as follows: First Quarter (January 1 through March 31); Second Quarter (April 1  
23 through June 30); Third Quarter (July 1 through September 30); Fourth Quarter (October 1  
24 through December 31). The quarterly reports shall include the following data:

25

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- 1           (a) The number of Lifeline subscribers, excluding resold Lifeline subscribers, for each  
2 month during the quarter;
- 3           (b) The number of subscribers who received Link-Up for each month during the  
4 quarter;
- 5           (c) The number of new Lifeline subscribers added each month during the quarter;
- 6           (d) The number of transitional Lifeline subscribers who received discounted service for  
7 each month during the quarter; and
- 8           (e) The number of residential access lines with Lifeline service that were resold to  
9 other carriers each month during the quarter.

10           Specific Authority 120.80(13)(d), 350.127(2), 364.0252, 364.10(3)(j), FS  
11 Law Implemented 364.0252, 364.10, 364.105, 364.183(1), FS  
12 History New 1-2-07, Amended 12-6-07, Amended XX-XX-XX.

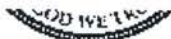
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Rule 25-4.0665 – 3-9-09

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## Lifeline and Link-Up Florida On-line Self Certification Form

<input checked="" type="radio"/> English
<input type="radio"/> Español
<input type="radio"/> Creole



**Secured**

ABOUT SSL  
CERTIFICATES

**Section 364.107(1), Florida Statutes provides that personal identifying information concerning a participant in a telecommunications carrier's Lifeline Assistance Plan held by the Public Service Commission is confidential.**

Customers of AT&T Florida, CenturyLink, or Verizon who are at or below 150% of the federal poverty income guidelines, but are not currently receiving benefits from one of the listed programs, do qualify for Lifeline service. Those customers may demonstrate their eligibility for Lifeline service to the Florida Office of Public Counsel. Please contact the Florida Office of Public Counsel at 1-800-540-7039. Customers of other telephone companies who are at or below 150% of the federal poverty income guidelines, but are not currently receiving benefits from one of the listed programs, should contact their telephone company to see if their telephone company is voluntarily enrolling Lifeline applicants through the income eligibility test of 150% or less of the federal poverty income guidelines.

### Contact Information

*Last Name		*First Name	
*Address Line 1			
Address Line 2			
*City		*State FL <input type="button" value="v"/>	*Zip Code
*Telephone (###-###-####)		Date (mm/dd/yyyy)	03/10/2010
		* Date of Birth (mm/dd/yyyy)	03/10/2010

<p>* Last 4 digits of Social Security Number</p>	<input style="width: 100%; height: 20px;" type="text"/>	<p>The last four digits of your Social Security Number are required to complete this application. If you do not wish to provide this information here, please apply for Lifeline directly through your Service Provider.</p>
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<p><b>Service Provider</b></p> <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="radio"/> Alltel Wireless  <input type="radio"/> American Dial Tone  <input type="radio"/> AT&amp;T/BellSouth  <input type="radio"/> Budget Phone, Inc.  <input type="radio"/> CenturyLink  <input type="radio"/> dPi Teleconnect  <input type="radio"/> Express Phone Service  <input type="radio"/> FLATEL/Florida Telephone Co.  <input type="radio"/> Frontier Communications  <input type="radio"/> GTC FairPoint Communications  <input type="radio"/> ITS Telecommunications Systems                 </td> <td style="width: 50%; vertical-align: top;"> <input type="radio"/> Knology, Inc.  <input type="radio"/> Midwestern Communications (MTI)  <input type="radio"/> NEFCOM  <input type="radio"/> Nexus Communications (TSI)  <input type="radio"/> Safelink/TracFone  <input type="radio"/> Smart City Telecom  <input type="radio"/> Sprint/Nextel  <input type="radio"/> TDS Telecom  <input type="radio"/> Verizon  <input type="radio"/> Windstream                 </td> </tr> </table>	<input type="radio"/> Alltel Wireless <input type="radio"/> American Dial Tone <input type="radio"/> AT&T/BellSouth <input type="radio"/> Budget Phone, Inc. <input type="radio"/> CenturyLink <input type="radio"/> dPi Teleconnect <input type="radio"/> Express Phone Service <input type="radio"/> FLATEL/Florida Telephone Co. <input type="radio"/> Frontier Communications <input type="radio"/> GTC FairPoint Communications <input type="radio"/> ITS Telecommunications Systems	<input type="radio"/> Knology, Inc. <input type="radio"/> Midwestern Communications (MTI) <input type="radio"/> NEFCOM <input type="radio"/> Nexus Communications (TSI) <input type="radio"/> Safelink/TracFone <input type="radio"/> Smart City Telecom <input type="radio"/> Sprint/Nextel <input type="radio"/> TDS Telecom <input type="radio"/> Verizon <input type="radio"/> Windstream	<p>I hereby certify that I participate in the following public assistance program(s):</p> <table style="width: 100%;"> <tr><td><input type="checkbox"/> Medicaid</td></tr> <tr><td><input type="checkbox"/> Food Stamps</td></tr> <tr><td><input type="checkbox"/> Temporary Cash Assistance (TCA)</td></tr> <tr><td><input type="checkbox"/> Supplemental Security Income (SSI)</td></tr> <tr><td><input type="checkbox"/> Federal Public Housing Assistance (Section 8)</td></tr> <tr><td><input type="checkbox"/> Low-Income Home Energy Assistance Program (LIHEAP)</td></tr> <tr><td><input type="checkbox"/> National School Lunch Free Lunch Program</td></tr> <tr><td><input type="checkbox"/> Bureau of Indian Affairs Programs (Tribal Temporary Assistance for Needy Families, Head Start Subsidy, NSLP)</td></tr> </table>	<input type="checkbox"/> Medicaid	<input type="checkbox"/> Food Stamps	<input type="checkbox"/> Temporary Cash Assistance (TCA)	<input type="checkbox"/> Supplemental Security Income (SSI)	<input type="checkbox"/> Federal Public Housing Assistance (Section 8)	<input type="checkbox"/> Low-Income Home Energy Assistance Program (LIHEAP)	<input type="checkbox"/> National School Lunch Free Lunch Program	<input type="checkbox"/> Bureau of Indian Affairs Programs (Tribal Temporary Assistance for Needy Families, Head Start Subsidy, NSLP)
<input type="radio"/> Alltel Wireless <input type="radio"/> American Dial Tone <input type="radio"/> AT&T/BellSouth <input type="radio"/> Budget Phone, Inc. <input type="radio"/> CenturyLink <input type="radio"/> dPi Teleconnect <input type="radio"/> Express Phone Service <input type="radio"/> FLATEL/Florida Telephone Co. <input type="radio"/> Frontier Communications <input type="radio"/> GTC FairPoint Communications <input type="radio"/> ITS Telecommunications Systems	<input type="radio"/> Knology, Inc. <input type="radio"/> Midwestern Communications (MTI) <input type="radio"/> NEFCOM <input type="radio"/> Nexus Communications (TSI) <input type="radio"/> Safelink/TracFone <input type="radio"/> Smart City Telecom <input type="radio"/> Sprint/Nextel <input type="radio"/> TDS Telecom <input type="radio"/> Verizon <input type="radio"/> Windstream										
<input type="checkbox"/> Medicaid											
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<input type="checkbox"/> Supplemental Security Income (SSI)											
<input type="checkbox"/> Federal Public Housing Assistance (Section 8)											
<input type="checkbox"/> Low-Income Home Energy Assistance Program (LIHEAP)											
<input type="checkbox"/> National School Lunch Free Lunch Program											
<input type="checkbox"/> Bureau of Indian Affairs Programs (Tribal Temporary Assistance for Needy Families, Head Start Subsidy, NSLP)											

**I certify that I am a current recipient of the above program(s) and will notify my local telephone company when I am no longer participating in any of the above-designated program(s). I give permission to the duly authorized official(s) administering the above programs to provide to the local telephone company my participation status in any of the above program(s). I give this permission on the condition that the information in this form and any information about my participation in the above programs provided by officials be maintained by the company as confidential customer account information. I am aware that pursuant to Section 837.06, F.S., whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree.**

**I agree to these terms and conditions:**

- Yes
- No

<input type="button" value="CLEAR"/>	<input type="button" value="SUBMIT"/>
--------------------------------------	---------------------------------------

**Form PSC/RAD 158 (XX/XX)**

[PSC Home Page - MyFlorida](#)



## Application for Link-Up Florida and Lifeline Assistance

Billing Name \_\_\_\_\_

Service Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Last Four Digits of Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Telephone Number (     ) \_\_\_\_\_ **(NOTE: If you do not currently have local phone service, please contact a local phone provider in your area to establish service.)**

I hereby certify that I participate in the following public assistance program(s): **(Check all that apply)**

- Temporary Cash Assistance
- Food Stamps
- Medicaid
- Low-Income Home Energy Assistance Program (LIHEAP)
- Supplemental Security Income (SSI)
- Federal Public Housing Assistance (Section 8)
- National School Lunch Program (NSLP) – Free Lunch
- Bureau of Indian Affairs Programs (Tribal Temporary Assistance for Needy Families, Head Start Subsidy, NSLP)

**I certify that I am a current recipient of the above program(s) and will notify my local telephone company when I am no longer participating in any of the above-designated program(s). I give permission to the duly authorized official(s) administering the above programs to provide to the local telephone company my participation status in any of the above program(s). I give this permission on the condition that the information in this form and any information about my participation in the above programs provided by officials be maintained by the company as confidential customer account information. I am aware that pursuant to Section 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 or her official duty shall be guilty of a misdemeanor of the second degree.**

\_\_\_\_\_  
**Customer's signature**

\_\_\_\_\_  
**Date**

Customers of AT&T Florida, CenturyLink, or Verizon who are at or below 150% of the federal poverty income guidelines, but are not currently receiving benefits from one of the listed programs, do qualify for Lifeline service. Those customers may demonstrate their eligibility for Lifeline service to the Florida Office of Public Counsel. Please contact the Florida Office of Public Counsel at **1-800-540-7039**. Customers of other telephone companies who are at or below 150% of the federal poverty income guidelines, but are not currently receiving benefits from one of the listed programs, should contact their telephone company to see if their telephone company is voluntarily enrolling Lifeline applicants through the income eligibility test of 150% or less of the federal poverty income guidelines.

**Please mail or fax this application to the telephone company that provides your service.**

<p><b>AT&amp;T Florida</b> 304 Pine Avenue - 4<sup>th</sup> Floor Albany, GA 31702 Fax: 1-888-726-3223</p>	<p><b>Alltel Wireless</b> Please visit a local Alltel retail store to determine if Alltel offers Lifeline in your area and complete an application.</p>	<p><b>American Dial Tone</b> P. O. Box 2203 Dunedin, FL 34698-2203 Fax: (727)669-9451</p>	<p><b>Budget Phone, Inc.</b> Please call 1-888-424-5588 to be referred to a local Budget Phone store to apply.</p>
<p><b>CenturyLink</b> P. O. Box 7086 London, KY 40742 Fax: 1-800-473-2017</p>	<p><b>dPi Teleconnect</b> 2997 LBJ Freeway, Suite 225 Dallas, TX 75234 Fax: 1-800-610-9557</p>	<p><b>Express Phone Service</b> 1803 W. Fairfield Drive Pensacola, FL 32501 Fax: (850)308-1151</p>	<p><b>FairPoint Communications</b> Offline Services Group 30 East Main Street Westfield, NY 14787 Fax: 1-877-321-3166</p>
<p><b>FLATEL/Florida Telephone Co.</b> 2300 Palm Beach Lakes Blvd., Suite 100 West Palm Beach, FL 33409 Fax: 1-877-593-9723 Phone: 1-888-777-6561</p>	<p><b>Frontier Communications</b> P. O. Box 1038 Fort Dodge, IA 50501 Fax: (515)573-1241</p>	<p><b>ITS Telecommunications</b> Attn: Customer Service P. O. Box 277 Indiantown, FL 34956 Fax: (772)597-4155</p>	<p>(Bay County Address) <b>Knology, Inc.</b> 235 W. 15<sup>th</sup> Street Panama City, FL 32401 Fax: (850)215-5800</p>
<p>(Pinellas County Address) <b>Knology, Inc.</b> 3001 Gandy Boulevard North Pinellas Park, FL 33782 Fax: (727)576-4800</p>	<p><b>Midwestern Telecommunications</b> P. O. Box 1401 Chicago Heights, IL 60411 Fax: (708)756-7721</p>	<p><b>NEFCOM</b> P. O. Box 485 Macclenny, FL 32063 Fax: (904)259-1200</p>	<p><b>Nexus Communications TSI</b> P. O. Box 247168 Columbus, Ohio 43224-7168 Fax: (614)883-6496</p>
<p><b>SafeLink Wireless/TracFone</b> Lifeline/Free Cell Phone Dept. P. O. Box 220009 Milwaukie, OR 97269-0009 Fax: 1-800-834-7713 Phone: 1-800-977-3768</p>	<p><b>Smart City Telecom</b> Attn: Customer Care P. O. Box 22555 Lake Buena Vista, FL 32830 Fax: (407)828-6701</p>	<p><b>Sprint Nextel</b> See Sprint Nextel's Web site at <a href="http://www.sprint.com/lifeline">http://www.sprint.com/lifeline</a> for more information and to download an application, or call 1-888-408-3306.</p>	<p><b>TDS Telecom - Lifeline</b> P. O. Box 608 Lancaster, WI 53813 Fax: 1-877-271-2861</p>
<p><b>Verizon - SRC</b> MC: FLSP2193/P.O. Box 11328 St. Petersburg, FL 33733-9656 Fax: 1-888-806-7026</p>	<p><b>Windstream Florida</b> 1720 Galleria Blvd. Charlotte, NC 28270 Fax: (704)849-7000</p>		



COMMISSIONERS:  
NANCY ARGENZIANO, CHAIRMAN  
LISA POLAK EDGAR  
NATHAN A. SKOP

STATE OF FLORIDA



GENERAL COUNSEL  
S. CURTIS KISER  
(850) 413-6199

## Public Service Commission

June 14, 2010

Ms. Liz Cloud  
Florida Department of State  
Administrative Coe and Weekly Section  
R. A. Gray Bldg., Suite 101  
Tallahassee, FL 32399-0250

**Re: Docket No. 090504-TP - New Forms PSC/RAD 157 (06/10) and PSC/RAD 158 (06/10) for Rule 25-4.0665 Certification Packet**

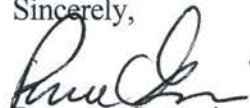
Dear Ms. Cloud:

On June 2, 2010, we sent you a rule certification packet for adoption of Rule 25-4.0665. As part of that packet, we included copies of Forms PSC/RAD 157 (XX/XX) and PSC/RAD 158 (XX/XX), referenced in the rule, along with a "Certification of Materials Incorporated by Reference in Rules Filed with the Department of State," from Ann Cole, our Commission Clerk.

Please substitute the enclosed copies of these two forms for the ones we previously submitted to you. The updated copies show the revision date of 06/10 on both forms, as well as a reference to the rule in which they are incorporated by reference. Also enclosed is a new "Certification of Materials Incorporated by Reference in Rules Filed with the Department of State," for the updated Forms.

Please feel free to contact me at (850) 413-6224 if you have any questions. Thank you for your attention to this matter.

Sincerely,

  
Rosanne Gervasi  
Senior Attorney

RG/md  
Enclosures

cc: Joint Administrative Procedures Committee (Brian Moore)

I:\Lifeline rule\forms letter.rg.doc

CERTIFICATION OF  
MATERIALS INCORPORATED BY REFERENCE  
IN RULES FILED WITH THE DEPARTMENT OF STATE

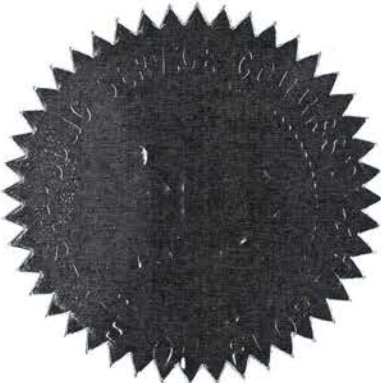
Pursuant to Rule 1B-30.005, Florida Administrative Code, I hereby certify that the attached are true and correct copies of the following materials incorporated by reference in Rule 25-4.0665. Under the provisions of subparagraph 120.54(3)(e)(6), F.S., the attached materials take effect 20 days from the date filed with the Department of State, or a later date as specified in the rule.

Form PSC/RAD 157 (06/10) – Application for Link-Up Florida and Lifeline Assistance

Form PSC/RAD 158 (06/10) – Lifeline and Link-Up Florida On-line Self Certification Form

  
\_\_\_\_\_  
ANN COLE  
Commission Clerk

\_\_\_\_\_  
Number of Pages Certified





## Application for Link-Up Florida and Lifeline Assistance

Billing Name \_\_\_\_\_

Service Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Last Four Digits of Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Telephone Number (     ) \_\_\_\_\_ **(NOTE: If you do not currently have local phone service, please contact a local phone provider in your area to establish service.)**

I hereby certify that I participate in the following public assistance program(s): **(Check all that apply)**

- Temporary Cash Assistance
- Food Stamps
- Medicaid
- Low-Income Home Energy Assistance Program (LIHEAP)
- Supplemental Security Income (SSI)
- Federal Public Housing Assistance (Section 8)
- National School Lunch Program (NSLP) – Free Lunch
- Bureau of Indian Affairs Programs (Tribal Temporary Assistance for Needy Families, Head Start Subsidy, NSLP)

**I certify that I am a current recipient of the above program(s) and will notify my local telephone company when I am no longer participating in any of the above-designated program(s). I give permission to the duly authorized official(s) administering the above programs to provide to the local telephone company my participation status in any of the above program(s). I give this permission on the condition that the information in this form and any information about my participation in the above programs provided by officials be maintained by the company as confidential customer account information. I am aware that pursuant to Section 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 or her official duty shall be guilty of a misdemeanor of the second degree.**

\_\_\_\_\_  
**Customer's signature**

\_\_\_\_\_  
**Date**

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<p><b>AT&amp;T Florida</b> P. O. Box 9042 South San Francisco, CA 94803 Fax: 1-888-726-3223 Phone: 1-800-288-2020</p>	<p><b>American Dial Tone</b> P. O. Box 2203 Dunedin, FL 34698-2203 Fax: (727) 669-9451 Phone: 1-877-246-1604</p>	<p><b>Budget Phone, Inc.</b> Please call 1-888-424-5588 to be referred to a local Budget Phone store to apply.</p>	<p><b>CenturyLink</b> CenturyLink Scanning ATTN: Data Distribution Mailstop: FLAPKA0107 P. O. BOX 165700 Altamonte Springs, FL 32716 Fax: 1-800-473-2017 Phone: 1-800-339-1811</p>
<p><b>dPi Teleconnect</b> 2997 LBJ Freeway, Suite 225 Dallas, TX 75234 Fax: 1-800-610-9557 Phone: 1-877-564-6374</p>	<p><b>Easy Telephone Services</b> P. O. Box 590007 Tamarac, FL 33359 Fax: (954) 640-0348 Phone: (954) 777-2771</p>	<p><b>Express Phone Service</b> 1803 W. Fairfield Drive Pensacola, FL 32501 Fax: (850) 308-1151 Phone: 1-877-439-1010</p>	<p><b>FairPoint Communications</b> Offline Services Group 30 East Main Street Westfield, NY 14787 Fax: 1-877-321-3166 Phone: 1-800-400-5568</p>
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## Lifeline and Link-Up Florida On-line Self Certification Form

<input checked="" type="radio"/> English
<input type="radio"/> Español
<input type="radio"/> Creole



*Secured*

ABOUT SSL  
CERTIFICATES

**Section 364.107(1), Florida Statutes provides that personal identifying information concerning a participant in a telecommunications carrier's Lifeline Assistance Plan held by the Public Service Commission is confidential.**

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### Contact Information

*Last Name	<input type="text"/>	*First Name	<input type="text"/>
*Address Line 1	<input type="text"/>		
Address Line 2	<input type="text"/>		
*City	<input type="text"/>	*State FL <input type="button" value="v"/>	*Zip Code <input type="text"/>
*Telephone (###-###-####)	<input type="text"/>	Date (mm/dd/yyyy) 06/09/2010	* Date of Birth (mm/dd/yyyy) 06/09/2010

<p>* Last 4 digits of Social Security Number</p>	<input style="width: 100%; height: 20px;" type="text"/>	<p>The last four digits of your Social Security Number are required to complete this application. If you do not wish to provide this information here, please apply for Lifeline directly through your Service Provider.</p>
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<p><b>Service Provider</b></p> <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="radio"/> Alltel Wireless  <input type="radio"/> American Dial Tone  <input type="radio"/> AT&amp;T/BellSouth  <input type="radio"/> Budget Phone, Inc.  <input type="radio"/> CenturyLink  <input type="radio"/> dPi Teleconnect  <input type="radio"/> Express Phone Service  <input type="radio"/> FLATEL/Florida Telephone Co.  <input type="radio"/> Frontier Communications  <input type="radio"/> GTC FairPoint Communications  <input type="radio"/> ITS Telecommunications Systems                 </td> <td style="width: 50%; vertical-align: top;"> <input type="radio"/> Knology, Inc.  <input type="radio"/> Midwestern Communications (MTI)  <input type="radio"/> NEFCOM  <input type="radio"/> Nexus Communications (TSI)  <input type="radio"/> Safelink/TracFone  <input type="radio"/> Smart City Telecom  <input type="radio"/> Sprint/Nextel  <input type="radio"/> TDS Telecom  <input type="radio"/> Verizon  <input type="radio"/> Windstream                 </td> </tr> </table>	<input type="radio"/> Alltel Wireless <input type="radio"/> American Dial Tone <input type="radio"/> AT&T/BellSouth <input type="radio"/> Budget Phone, Inc. <input type="radio"/> CenturyLink <input type="radio"/> dPi Teleconnect <input type="radio"/> Express Phone Service <input type="radio"/> FLATEL/Florida Telephone Co. <input type="radio"/> Frontier Communications <input type="radio"/> GTC FairPoint Communications <input type="radio"/> ITS Telecommunications Systems	<input type="radio"/> Knology, Inc. <input type="radio"/> Midwestern Communications (MTI) <input type="radio"/> NEFCOM <input type="radio"/> Nexus Communications (TSI) <input type="radio"/> Safelink/TracFone <input type="radio"/> Smart City Telecom <input type="radio"/> Sprint/Nextel <input type="radio"/> TDS Telecom <input type="radio"/> Verizon <input type="radio"/> Windstream	<p>I hereby certify that I participate in the following public assistance program(s):</p> <table style="width: 100%;"> <tr><td><input type="checkbox"/> Medicaid</td></tr> <tr><td><input type="checkbox"/> Food Stamps</td></tr> <tr><td><input type="checkbox"/> Temporary Cash Assistance (TCA)</td></tr> <tr><td><input type="checkbox"/> Supplemental Security Income (SSI)</td></tr> <tr><td><input type="checkbox"/> Federal Public Housing Assistance (Section 8)</td></tr> <tr><td><input type="checkbox"/> Low-Income Home Energy Assistance Program (LIHEAP)</td></tr> <tr><td><input type="checkbox"/> National School Lunch Free Lunch Program</td></tr> <tr><td><input type="checkbox"/> Bureau of Indian Affairs Programs (Tribal Temporary Assistance for Needy Families, Head Start Subsidy, NSLP)</td></tr> </table>	<input type="checkbox"/> Medicaid	<input type="checkbox"/> Food Stamps	<input type="checkbox"/> Temporary Cash Assistance (TCA)	<input type="checkbox"/> Supplemental Security Income (SSI)	<input type="checkbox"/> Federal Public Housing Assistance (Section 8)	<input type="checkbox"/> Low-Income Home Energy Assistance Program (LIHEAP)	<input type="checkbox"/> National School Lunch Free Lunch Program	<input type="checkbox"/> Bureau of Indian Affairs Programs (Tribal Temporary Assistance for Needy Families, Head Start Subsidy, NSLP)
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**I agree to these terms and conditions:**

Yes

No

<input type="button" value="CLEAR"/>	<input type="button" value="SUBMIT"/>
--------------------------------------	---------------------------------------