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| **Central Office Code Assignment Guidelines (COCAG)  Central Office Code (NXX) Assignment Request-Part 1  Revised: January 4, 2016** | | | | | | | |
|  | | | | | | | |
| Tracking Number: | 360-LA CENTER-WA-939253 | | | | | | |
|  | Full NXX: LRN |  |  |  |  |  |  |
| Type of Application: | New        Change1        Delete |  |  |  |  |  |  |
|  | | | | | | | |
| 1.0 GENERAL INFORMATION | | | | | | | |
| 1.1 Contact Information: | | | | | | | |
|  | | | | | | | |
| Code Applicant: | | | | | | | |
| Company/Entity Name: | LEWIS RIVER TELEPHONE COMPANY, INC. | | | | | | |
| Headquarters Address: | 525 Junction Rd | | | | | | |
| City, State, Zip: | Madison, WI, 53717 | | | | | | |
| Contact Name: | Paul Nejedlo | | | | | | |
| Contact Address: | 525 Junction Rd | | | | | | |
| City: | Madison | State: | WI | ZIP: | 53717 |  |  |
| Phone: | 608-664-4659 | Fax : |  |  |  |  |  |
| E-mail: | paul.nejedlo@tdstelecom.com | |  |  |  |  |  |
| Code Administrator:2 | |  |  |  |  |  |  |
| Name: | David Morgan | | | | | | |
| Address: | 46000 Center Oak Plaza | | | | | | |
| City: | Sterling | State: | VA | ZIP: | 20166 |  |  |
| Phone: | 571-434-5381 | Fax : | 571-434-5502 |  |  |  |  |
|  |  | | | | | | |
| 1.2    NPA: 360 | NXX:3              LATA: 672               OCN:42427                    Parent Company's OCN(s) 0881 | | | |  |  |  |
| Switching Identification (Switching Entity/POI) 5LACTWAXAGT0 | | | |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Locality/City/Wire Center:LA CENTER | | | | Rate Center:6LA CENTER | | | |
| Homing Tandem Operating Co.7:QWEST | | | Tandem Homing CLLITM8:PTLDOR13C9T | | | |  |
|  |  | | | | | | |
| 1.3    Dates | |  |  |  |  |  |  |
| Date of Application:08/15/2016 | | Requested Effective Date:9,10                                02/15/2017 | | | |  |  |
|  |  |  |  |  |  |  |  |
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| By selecting this checkbox, I acknowledge that I am requesting the earliest possible effective date the Administrator can grant. Please note that this only applies to a reduction in the Administrator's processing time, however the request will still be processed in the order received. | | | | | | | |
|  |  | | | | | | |
| Request Expedited Treatment    Yes              No          **X** | | | | | | | |
| Expedite Documentation must be provided if "Request Expedite" = Yes | | | | | | | |
| Expedited Explanation: | | | | | | | |
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| |  |  |  | | --- | --- | --- | | 1.4     a)     Type of Company/Entity Requesting Code (LEC, IC, CMRS, Other):        Incumbent Local Exchange Carrier (ILEC) | | | | b) | Type of service (e.g., Cellular - Type 2):        Wireline |  | | c) | Code Assignment Preference (Optional)               360-995 |  | | d) | Codes that are undesirable, if any |  | | e) | Type of Change (Mark all that apply) |  | |  | OCN-Intra-company11 Switching Id Rate Center Tandem Homing CLLI |  | |  | OCN-Inter-company12 Effective Date LATA Extend Reservations |  | | | | | | | | |
|  | | | | | | | |
| 1.5    Type of Request (Initial, growth, etc.)         Growth | | | | | | | |
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| If an initial code, attach (1) evidence of certification and (2) proof of ability to place code in service within 60 days. If a growth code, attach months to exhaust worksheet. | | | | | | | |
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| Pooling Indicator: 13 Yes No | | |  |  |  |  |  |
|  | | | | | | | |
| 1.6    NPA Jeopardy Criteria Apply:     Yes No | | | | |  |  |  |
|  | | | | | | | |
| 1.7    Code request for new service (Explain): LRN NEEDED FOR NEW SWITCH BEING INSTALLED | | | | | | | |
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| 1.8       It is the code applicant's responsibility to arrange input of Part 2 information into BIRRDS. The 45-calendar day nationwide minimum interval cut-over for BIRRDS will not begin until input into BIRRDS has been completed. | | | | | | | |
|  | | | | | | | |
| |  | | --- | | Comments: | | | | | | | | |
|  | | | | | | | |
| I hereby certify that the above information requesting an NXX code is true and accurate to the best of my knowledge and that this application has been prepared in accordance with Central Office Code (NXX) Assignment Guidelines posted to the ATIS web site (http://www.atis.org/inc/incguides.asp) as of the date of this application14. | | | | | | | |
|  | | | | | | | |
| Paul Nejedlo | | Sr. Administrator | | | | 08/15/2016 | |
| Signature of Code Applicant | | Title | | | | Date | |
|  | | | | | | | |
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| 1Identify type and reason for change(s) in Section 1.4(e). | | | | | | | |
| 2A list of the current Code Administrator(s) who can provide assistance in completing this form is available upon request from NANPA. | | | | | | | |
| 3The NXX field is required for any code request in which there is a change or the NXX is being returned. | | | | | | | |
| 4Operating Company Number (OCN) assignments must uniquely identify the applicant. Relative to CO Code assignments, NECA-assigned Company Codes may be used as OCNs. Companies with no prior CO Code or Company Code assignments may contact NECA (800-228-8597) to be assigned a Company Code(s). Since multiple OCNs and/or Company Codes may be associated with a given company, companies with prior assignment should direct questions regarding appropriate OCN usage to the iconectiv TelcordiaTM Routing Administration (TRA) on 732-699-6700. | | | | | | | |
| 5This is an 11 character descriptor of the switch provided by the owning entity for the purpose of routing calls. This is the 11 character Common Language® Location Code (CLLITM Code) of the applicant's switch or POI. Common Language® and Telcordia® are registered trademarks and CLLITM, LERGTM Routing Guide and iconectivTM are trademarks and the Intellectual Property of Telcordia Technologies, Inc. dba iconectiv. | | | | | | | |
| 6Rate Center name must be a tariffed Rate Center associated with toll billing. | | | | | | | |
| 7Applies to any code applicant connecting to the Public Switched Telephone Network via a tandem owned by a different carrier. | | | | | | | |
| 8This is an eleven-character descriptor provided by the owning entity for the purpose of routing calls. This must be the CLLITM Location Identification Code of the switching entity/POI, and is the same on Part 2, Form 1, Page 2 of 2. | | | | | | | |
| 9Code applicants should request an effective date that is at least 66 calendar days from the submission of this form. It should be noted that interconnection arrangements and facilities need to be in place prior to activation of a code. Such arrangements are outside the scope of these guidelines. | | | | | | | |
| 10Requests for code assignment shall not be made more than six months prior to the requested effective date. | | | | | | | |
| 11Select if you are the current Code Holder | | | | | | | |
| 12Select if you are not the current Code Holder | | | | | | | |
| 13The Applicant will indicate "YES" if the NXX being requested will be used for thousands-block number pooling and will leave this field blank if it is not. | | | | | | | |
| 14An incomplete form may result in delays in processing this request. | | | | | | | |