

**Discovery Requests for Triennial Review
Proceedings**

SWITCHING

1. Please identify all switches owned or controlled by [company] that are being used in [state] to provide service to customers served by facilities at or above the DS-1 level. For each switch, please state the number and percentage of customers that are being served by DS-1 and above facilities that are self-provided by [company] and are not leased from another carrier.
2. Please access website <http://www.TRAinfo.com> showing publicly available specifications from the LERG Routing Guide of all central office switches currently in place in [state]. Please state whether the information in the LERG is current and accurate for the switches that [company] owns, operates, controls, maintains, or from which you lease dial tone or trunking functionality/capacity. If any of the information is not accurate, please identify the inaccurate information and provide corrected information, including any additions, deletions or changes. As part of your review of the information in the LERG, please state whether the CLLI code is accurate for each switch that [company] owns, operates, controls, maintains, or from which you lease dial tone or trunking functionality/capacity. In addition, please state whether the LERG definition of the function of each switch (i.e., tandem, end office, etc.) is accurate.

3. For each switch that [company] operates, controls, maintains, or from which you lease dial tone or trunking functionality/capacity within [state], please report (in Excel spreadsheet format) whether the switch is currently providing switching for local voice grade services, tandem switching¹ for voice calls, or both. In addition, for each switch, please provide traffic volumes, expressed in minutes of use, for year 2002 for local traffic and tandem traffic. If these data are not available for year 2002, please provide the information for the most recent 12-month period for which the data are available. Provide all documents that reflect, refer or relate to the information you provide in response to this request. In addition, please provide the following information for each switch:

- a. Switch type;
- b. The generic (feature package) loaded in the switch;
- c. Current number of equipped lines in the switch;
- d. The current number of equipped trunks in the switch;
- e. 2001 and 2002 line growth for the switch; and
- f. 2001 and 2002 trunk growth for the switch.

4. For each switch that [company] owns or controls within [state], please state (in Excel spreadsheet format) if the switch is providing services to end-user customers served with DS-1 facilities and above. If so, please:

- a. identify the switch (by CLLI) and the LATA's served by each switch;
- b. identify the geographic scope over which [company serves such end-user customers with its own switch;
- c. provide the volume of such traffic (expressed in minutes of use) for the most recent 12-month period;

¹ Tandem switching is defined as switching of telephone traffic between two subtending end offices.

- d. state the manner in which such traffic is transported to the switch (i.e., transport purchased from a provider other than Qwest, transport purchased from Qwest, EELs, or transport via facilities owned by your entity; and
 - e. If [company is serving these end-user customers using DS-1 and above facilities in one LATA in [state] using a switch located in a different LATA (including a LATA in another state), please identify the state in which the switch is located and describe the means by which you transport traffic from the second LATA to the switch.
5. Please report (in Excel spreadsheet format) the number of DS1 level business lines in [state] served by unbundled loops for which [company] provides switching dial tone functionality. In responding to this request, please separate loop facilities by the categories set forth in the following table:

Sample Response Form							
<u>State</u>	<u>Wire Center</u>	<u>Residential</u>			<u>Business</u>		
		# DS1 lines served via your facilities	# <u>DS1 lines served via Qwest leased facilities</u>	# <u>DS1 lines served via leased from third party</u>	# DS1 lines served via your facilities	# <u>DS1 lines served via Qwest leased facilities</u>	# <u>DS1 lines served via leased from third party</u>

6. If [company] provides services operating at DS-1 and above (i.e., Digital Switched Service, Primary Rate Interface, etc) that terminate directly at end users' premises, please provide the city name, wire center and street address associated with each such termination. In addition, please:
- a. Report the service being provided at each such address (e.g., local switched service, high-speed data, video, etc) and capacity level;
 - b. For services operating at DS-1 level or above, identify what category of facilities over which they are being provided (e.g., fiber, COAX, copper, radio, wireless, fixed wireless);

- c. For services operating at DS-1 level or above provided over network facilities obtained from another entity, please provide the name of the entity from which you obtain the facility and identify the type of facility used in providing the DS-1-level service to the end user.
- d. For each multi-tenant building in which [company] provides services operating at DS-1 level or above, state whether [company] is capable of serving all customers located in each building with its existing, installed facilities.
- e. If answer to (d) is no, whether customers could be served by adding electronics or other steps that do not require laying new cable.

Sample Response Form							
State	City	Wire Center	Street Address	Type of service provided (local switched, data, video)	Category of facility over which service is provided (e.g., fiber, COAX, copper, radio, wireless, fixed wireless)	Name of third party entity from which DS-1 level or above transport is obtained	Type of DS-1 level or above transport facility obtained from third party (e.g., fiber, COAX, copper, radio, wireless, fixed wireless)

9 MONTH TRANSPORT

- 7. Please report (in Excel spreadsheet format) the speed and number of transport facilities (i.e., trunks) in [state] running between two Qwest central offices or between a Qwest central office and a CLEC central office served via network facilities owned or controlled by [company], or leased from an entity other than Qwest. For each such facility, please identify the A location, the Z location and any other premises through which the facility is routed. In addition, please break down this total number of facilities by wire center in which those trunks or EELs are located (NOTE: if data unavailable by wire center, please report the data by city).
- 8. Please describe whether [company] has dark fiber transport facilities available to it. For each such dark fiber facility, provide the following information: (a) the number of

strands of fiber existing in that route, (b) the A location of the fiber, the Z location of the fiber and an identification of all intermediate premises through which the fiber is routed; (c) whether that fiber is self-provisioned, obtained from Qwest, or obtained from a third party (and, if so, whom), (d) whether that fiber is owned outright, held as an indefeasible right of use (“IRU”), or has been obtained on some other basis (and, if so, what basis), (e) what electronics are actually connected or available to be connected at the originating and terminating locations of the facility and (f) whether [company] has self provisioned these electronics.

9. Please report (in Excel spreadsheet format) the number of transport trunks between any Qwest switch and a CLEC switch in [state] served via network facilities owned or controlled by [company], or leased from an entity other than Qwest. Please break down this total by wire center in which those terminations are located (NOTE: if data unavailable by wire center, please report the data by city).

Sample Response Form			
State	Wire Center	# of trunks owned by your entity	# of trunks obtained from a non-Qwest entity

10. For [state], please provide a current mapping of all existing standard copper, COAX, fiber facilities (including points of access to these facilities), dark fiber and microwave routes owned, controlled, or leased by [company]. This mapping should contain a view at the state level showing major facility routes owned, leased or controlled

by [company], and metropolitan area mapping showing specific facility routes within any and all metropolitan areas in which your network facilities are now located. In addition, please specify whether these facilities are dark or lit.

11. Please report available capacity of all standard copper, COAX, fiber facilities and microwave routes installed and owned by your [company] in [state].

12. Please provide details (e.g., purchaser of capacity, specific routes involved, type of transport, number of circuits purchased) regarding any transport capacity on your network that is currently being leased, resold or otherwise provided to another telecommunications provider.

13. If you currently purchase or lease interoffice transport within [state] from a company other than Qwest, please report which entity you currently obtain this service from, and also report the routes involved as well as number/type of transport facilities (e.g., copper, fiber, or radio) being purchased. Please report separately the quantity of DS0, DS1, DS3 optical carrier level (OC) and dark fiber connections you currently are purchasing, leasing or otherwise are being provided from non-Qwest entities.

Sample Response Form				
State	Entity from which transport is obtained	Originating and terminating points of each transport facility leased	Type of transport leased (DS0,DS1,DS3, OC,dark fiber))	Quantity of transport connections leased, by type (as of 3/03)

14. Does [company] provide transport facilities on a wholesale basis to other carriers in [state]? If so, please list identify all such facilities that [company] has provided,

including (1) the entity that obtained the transport, (2) the originating and terminating point of each facility, and (3) the type of facility (DS0, DS1, DS3, OC, dark fiber).

9 MONTH SWITCHING

15. Please list each [state] LATA and each wire center within each LATA in which [company] provides or has provided local telecommunications services since passage of the Telecommunications Act of 1996.

16. For each LATA and wire center identified in response to requests 1 and 2, please identify:

- a. How many local telecommunications lines [company] has in service?
Please provide this information by:
 - i. Switched Services
 - (a) POTS;
 - (b) Centrex;
 - (c) ISDN BASIC;
 - (d) ISDN Primary;
 - (e) PBX Trunk (Analog only);
 - (f) Switched Services riding a DS1 pipe (to a Digital PBX, ISDN PRIMARY, etc; Count by channel);
 - (g) Other switched services;
 - (h) Total switched services.
- b. What percentage of the lines (by line types defined above) identified in response to (a) are
 - i. UNE-P Business;
 - ii. UNE-P Residence;
 - iii. UNE-L Business;
 - iv. UNE-L Residence;

- v. Business lines provided using the [company]'s own loop facilities and another party's dial tone (switching);
- vi. Business lines provided using [company]'s own loop facilities and own dial tone;
- vii. Business lines using a third party's loop facilities and [company]'s own dial tone;
- viii. Residential lines provided using the company's own loop facilities and another party's dial tone;
- ix. Residential lines provided using the [company]'s own loop facilities and own dial tone;
- x. Residential lines using a third party's loop facilities and the [company]'s own dial tone;
- xi. For any residential and business lines served in any manner not listed above, in what manner are those lines served?

17. Please list all areas in [state] in which [company] is certified to provide local exchange service.

18. Please list all areas in [state] in which [company] has engaged in any form of advertising or marketing of local exchange services within the past 12 months. Please produce all documents that reflect or relate to such advertisements and marketing efforts, including copies of all advertisements and documents describing marketing campaigns.

19. Please state whether [company] has any business plans to begin providing local exchange service in areas of [state] where it does not currently provide such service. If [company] has such plans, please identify the new areas where it intends to provide service, and produce all documents that refer or relate to [company]'s plans to expand into these new areas.

20. Please state whether [company] has purchased switching (wholesale or retail) in [state] from any entity other than Qwest. If [company] has purchased switching from any entity other than Qwest, please identify all such entities and identify the locations of their switches that are providing the switching and the locations of the customers served by [company] via those switches.
21. Please state whether [company] is using any partitioned switches in [state] that it owns, leases, or otherwise controls jointly with another carrier(s) and whether you share a CLLI with another carrier for the switch. Please identify the locations of any such switches and the identities of the other carriers and describe the capacity and capability of the partition that [company] owns, leases, or otherwise controls. As used in this request, “partitioned” means switches shared by different entities.
22. Identify every switch for which you share a CLLI code with another carrier and, for each switch, explain why you are sharing the CLLI code.
23. Of the lines that [company] serves in [state] using UNE-Ls, please:
- a. State the percentage of these lines that are connected to DLCs in collocation space.
 - b. State the percentage of these lines that are connected to DLCs in collocation space.
24. Please identify all rate plans that [company] offers in [state], and list all components (including vertical features) of the rate plans that [company] offers to businesses and all the components of the rate plans that [company] offers to residential customers. In addition, please produce all documents that describe the rate plans [company] offers in [state].

25. For each switch that [company] owns operates, controls, maintains, or from which you lease dial tone or trunking functionality/capacity within [state], please state (in Excel spreadsheet format) if the switch is providing originating voice grade services for residential end-user customers and/or small business customers (defined for this question as businesses with four DS-0 lines or fewer). If so, please:

- a. Identify the switch (by CLLI) and the LATA(s) served by each switch (the LATA in which the switch providing the originating dial tone is physically located);
- b. Identify the geographic scope over which [company] serves residential end-user customers and/or small business customers with its own switch;
- c. Number of originating business and residential customers served by this switch;
- d. Provide the volume of such traffic (expressed in minutes of use) for the most recent 12-month period;
- e. Identify the rate centers you are serving for originating traffic;
- f. State the manner by which such traffic is transported to the switch (i.e., transport purchased from a provider other than Qwest, transport purchased from Qwest, EELs or transport via facilities owned by your entity); and
- g. If [company] is serving customers (as defined above) in one LATA in [state] using a switch located in another LATA (including a LATA in another state), please identify the LATA and state in which the switch is located and describe the means by which you transport traffic from the second LATA to the switch.

26. For each switch that [company] owns operates, controls, maintains, or from which you lease dial tone or trunking functionality/capacity within [state], please report (in Excel spreadsheet format) the level of traffic supported by that switch relative to the installed capacity of the switch expressed as a percentage (i.e., number of CCS at average busy hour divided by installed CCS capacity of the switch). In addition, please provide:

- a. For each switch, the percentage change in that value over the most recent 12-month period; and
- b. For each switch, a statement of whether the local switching capacity of the switch can be expanded through modular software and hardware additions. If you assert any obstacles to expansion, please identify and explain all such obstacles.

Sample Response Form			
Switch CLI Code	(A) Average Busy Hour CCS (August 2003)	% Change 8/2002 to 8/2003	Switch expandable beyond current capacity via modular hardware? (y/n and reason)

27. For each switch in [state] that [company] owns or controls and that is providing switching for local voice services, please report (in Excel spreadsheet format): (a) whether the switch is serving mass market customers, enterprise customers or both; (b) whether the switch is serving third-party local service providers; (c) the number of mass market switching ports; (d) the number of enterprise switching ports.

Sample Response Form						
Switch CLI Code	Switch serving mass markets, enterprise or both (M, E, B)	(if yes) % of switching ports in service	Switch serving 3 rd party local service providers? (y/n)	(if yes) % of switching ports in service	# of mass markets switching ports	# of enterprise switching ports

28. Please identify each entity, other than Qwest, from which [company] is purchasing or leasing interoffice tandem switching in [state]. For all such switching that

[company] has obtained, please provide the tandem minutes of use obtained from each entity by trunk group, wire center, and tandem.

29. Does [company] believe that there are costs associated with converting or otherwise using a switch currently serving only enterprise customers to also serve mass market customers? If [company] believes that there are such switching costs, please identify all such costs and explain why it would be necessary to incur them to begin serving mass market customers. Produce any documents or data that support your response.

30. Please report (in Excel spreadsheet format) the number of DS0 level (voice grade) residential and business lines in [state] that [company] serves by loops or lines for which a company other than Qwest provides switching dial tone functionality. In responding to this request, please separate by the categories set forth in the following table:

Sample Response Form						
<u>State</u>	<u>Residential</u>			<u>Business</u>		
	<u># DS0 lines served via your facilities</u>	<u># DS0 lines served via Qwest leased facilities</u>	<u># DS0 lines served via leased from third party</u>	<u># DS0 lines served via your facilities</u>	<u># DS0 lines served via Qwest leased facilities</u>	<u># DS0 lines served via leased from third party</u>

31. Please state whether [company] is using extended enhanced links ("EELs") in [state]. If so, identify each EEL, and for each such facility, explain or state (1) the services being provided over the EEL, (2) the number of customers served by the EEL, (3) whether the facility is being used in lieu of collocation, (4) the number of loops connected to the EEL, a descriptions of the type of loop facilities so connected, and the

final demarcation point of each loop, and (5) whether the facility is being used as a functional private line.

ECONOMIC ISSUES

32. Please provide the average total revenue per line that [company] has received from its residential customers within [state] in each of the past two years. The average revenue per line should include revenues associated with the basic retail price charged to residential customers, vertical features, universal service payments, access charges, subscriber line charges, toll, long distance, local number portability, data, video, service to Internet service providers, international calling, and line revenues derived from any other sources. Please provide both the total average revenue per line and a breakdown of the amount of revenue for each category of revenue that comprises the total. In addition, please list intraLATA and interLATA revenues separately. Please produce all documents that reflect, refer or relate to the information provided in your response to this request.

33. Please provide the average total revenue per line that [company] has received from its business customers within [state] in each of the past two years. The average revenue per line should include revenues associated with the basic retail price charged to business customers, vertical features, universal service payments, access charges, subscriber line charges, toll, long distance, local number portability, data, international calling, and line revenues derived from any other sources. Please provide both the total average revenue per line and a breakdown of the amount of revenue for each category of revenue that comprises the total. In addition, please list intraLATA and interLATA revenues separately. If revenues differ depending on the type of business customer (small vs. large), please provide the total revenues and the breakdown of revenues by

type of business customer. Please provide the information by POTS, DS0, DS1, DS3, OC-3, OC-12, OC-48, and any other relevant categories. Please produce all documents that reflect, refer or relate to the information provided in your response to this request.

34. Please explain how [company] defines its business customer segments and provide any documents that reflect this definition or the criteria [company] uses to segment or classify business customers into distinct customer groups. Please produce all documents that reflect, refer or relate to the information provided in your response to this request.

35. Please provide the average total revenue per line that [company] has received from its entire customer base (residence and business combined) within [state] in each of the past two years. The average revenue per line should include revenues associated with the basic retail price charged to residential and business customers, vertical features, universal service payments, access charges, subscriber line charges, toll, long distance, data, international calling, local number portability, and line revenues derived from any other sources. Please provide both the total average revenue per line and a breakdown of the amount of revenue for each category of revenue that comprises the total. In addition, please list intraLATA and interLATA revenues separately. Please produce all documents that reflect, refer or relate to the information provided in your response to this request.

36. Please provide the average total cost per line that [company] has incurred to provision lines used to serve residential customers within [state] for each of the past two years for the following categories: (1) service provided by UNE-P, (2) service provided by UNE-L, and (3) service provided using [company]'s own facilities. Please provide a

breakdown of each cost component (*e.g.*, investment-related costs, network operations, maintenance, and SG&L) that is part of the average total cost per line, identifying the type and amount of each cost. Please produce all documents that reflect, refer or relate to the information provided in your response to this request.

37. Please provide the average total cost per line that [company] has incurred for lines used to serve business customers within [state] for each of the past two years, and in addition to a total average, please provide separate averages for service provided through UNE-P, UNE-L, and with [company]'s own facilities. Please provide a breakdown of each cost component (*e.g.*, investment-related costs, network operations, maintenance, and SG&L) that is part of the average total cost per line, identifying the type and amount of each cost. If costs differ depending on the type of business customer (small vs. large), please provide the total cost and the breakdown of costs by type of business customer. Please identify how your company defines "small" and "large" business customers. Please produce all documents that reflect, refer or relate to the information provided in your response to this request.

38. Please provide the average total cost per line that [company] has incurred to provision all the lines serving its entire customer base (residence and business combined) within [state] in each of the past two years, and in addition to a total average, please provide separate averages for service provided through UNE-P, UNE-L, and with [company]'s own facilities. Please provide a breakdown of each cost component (*e.g.*, investment-related costs, network operations, maintenance, and SG&L) that is part of the average total cost per line, identifying the type and amount of each cost. Please produce

all documents that reflect, refer or relate to the information provided in your response to this request.

39. Please list each switch that [company] has purchased, leased or upgraded at any time to provide local exchange service in [state], and provide the following information for each switch: (1) the type of switch; (2) the date of purchase; (3) the location; (4) the initial installed number of lines and trunks; (5) the initial price paid for the switch; (6) the EF&I (engineering, furnish, and install) costs of the switch (if separate from the price paid); (7) a description of any additions to the switch; (8) the price paid for each addition to each switch; (9) the amount of increased capacity provided by each addition; and (10) the price paid for each switch operating software upgrade. Please produce all documents that reflect, refer or relate to the information provided in your response to this request.

40. Please provide complete copies of [company]'s switching vendor contracts, including amendments, pricing lists, discount schedules, etc. If any redactions are required, please explain why and identify the type of information redacted.

41. For [company's] business operation in [state] that provides local exchange service, please provide the ratio of general and administrative expenses to revenues that [company] has had in each of the past two years. In providing this ratio, please exclude any extraordinary items from both the numerator and the denominator, and identify any extraordinary items, including the amounts, that are excluded. Please produce all documents and data relied upon to calculate these ratios, including data that will permit independent verification of the ratio.

42. For [company's] operation in [state] that provides local exchange service, please provide the ratio of all types of marketing costs and revenue offsets to revenues (excluding extraordinary items from both the numerator and denominator), including for the following categories.

- a. Advertising;
- b. Promotional discounts;
- c. Sales commissions;
- d. Billing and collection;
- e. Customer care (other than the above).

Please produce all documents and data relied upon to calculate these ratios, including data that will permit independent verification of the ratio. In addition, please provide the total annual amount of the costs for each category listed above for the past two years.

43. Does [company] incur any customer acquisition costs in addition to those listed above in Request 27 (excluding any charges paid to ILECs) to set up a new customer account and to establish service? If so, please identify all such costs and provide the ratio they represent in relation to revenues. Please provide the amount of all such costs, by individual cost categories, for each of the past two years.

44. For [company's] business operation in [state] that provides local exchange service, what is the allowance for uncollectable revenues as a fraction of annual revenues? In providing this response, please separate any losses (or potential losses) associated with the bankruptcies of WorldCom, Global Crossing, and XO

Communications from other bad debt. Please produce all documents that reflect, refer or relate to the information provided in your response to this request.

45. For [company's] business operation in [state] that provides local exchange service, what is the ratio of taxes (other than income taxes) to the value of the company's net plant? Please produce all documents that reflect, refer or relate to the calculation of this ratio, and produce the data that will permit independent verification of the ratio.

46. Please provide copies of any studies or analyses that [company] has conducted that evaluate or refer to the costs of collocation in [state]. In addition, please produce all documents and data that reflect, refer or relate to the collocation costs that [company] has incurred in [state].

47. Please identify all operational support systems ("OSSs") that [company] uses to support its business operation in [state] that provides local exchange service.

48. For each OSS included in your response to Request No. 32, please:

- a. Describe the functions performed by the OSS;
- b. Provide the number of local telecommunications lines that have been served by the OSS each year;
- c. Provide the total cost of each OSS, including:
 - i. The initial cost of the OSS;
 - ii. The average upgrade cost per year for the OSS; and
 - iii. The annual cost for each year in which [company] has used the OSS.

Please provide all documents that reflect or relate to the information you provide in response to this request.

49. For each OSS listed in response to Request No. 32, please state whether [company] uses the OSS to support services other than local telecommunications service. Please identify any such services.

50. For each Qwest office in [state] which [company] uses its own DLC equipment, please provide:

- a. The number of lines served;
- b. The number of lines installed;
- c. The concentration ratio; and
- d. The cost of the equipment, fully installed.

Please produce all documents that reflect or relate to the information you provide in your response to this request, including any documents that reflect the prices [company] has paid for DLC equipment.

51. Please describe the pricing structure that governs [company's] purchases of DLC equipment, including whether [company's] purchases this equipment on an EF&I basis, pre-wired, or pursuant to any other special specifications.

52. Please identify the monthly churn rate [company] has experienced for local exchange customers in each month in which it has provided local exchange service in the [state] market. In answering this request, you should calculate the churn rate based upon the number of lines lost each year divided by the average number of lines in service that year. In calculating churn, do not include customers who move but stay with the company.

53. In connection with [company's] churn rates in [state] in each of the past two years for local exchange customers, of the total customers that have left [company], please identify the percentage that have left within one month of signing up for service, within two months of signing up for service, within three months of signing up for service, and within six months of signing up for service. Please produce all documents and data that reflect or relate to the information you provide in response to this request.

54. Please produce all documents that reflect, refer, or relate to the churn rates for local exchange customers that [company] has experienced in [state].

55. Please provide all documents that summarize or otherwise reflect the financial results of [company's] CLEC operations in [state] in each of the past two years.

56. Please identify the percentage of [company's] revenues from local exchange customers in [state] that are derived from flat rate plans that do not include incremental charges for domestic long distance calls. Provide the percentage of total local exchange lines in [state] that are provided to the customer pursuant to a flat rate plan that does not include incremental charges for long distance calls. Please produce all documents that reflect, refer or relate to the information you provide in response to this request.

57. Please provide the average long-distance per minute usage in [state] of [company's] local exchange customers for whom [company] is also the long-distance carrier using the following breakdown:

- a. Local exchange customers using flat-rate plans that do not include incremental charges for domestic long-distance calls; and
- b. All other CLEC customers.

Please produce all documents that reflect, refer, or relate to the information you provide in response to this request.

58. Please identify the percentage of [company's] switched minutes in [state] that are directed to Internet service providers. Please produce all documents that reflect, refer or relate to the information you provide in your response to this request.

59. Please provide all fill factors or utilization rates for each switch in [state] for which [company] is responsible.

60. Please provide copies of any current contracts the [company] has with vendors for DLC equipment, including all pricing schedules, discounts, and amendments.

61. Please explain whether [company] pays for switching on a per line basis, and identify any switching components that [company] does not pay for on a per line basis.

62. If [company] offers intrastate switched access service to other carriers, please report your current switched access prices in [state].

63. If [company] offers intrastate-switched access service in [state], for each month since December 2001, please report (in Excel spreadsheet format) total revenue received for intrastate-switched access service.

64. If [company] offers intrastate long distance service to end users in [state], please report total intrastate long distance minutes of use and revenue for full years 2001 and 2002.

Sample Response Form				
State	2001 intrastate long distance minutes of use	2001 intrastate long distance revenue	2002 intrastate long distance minutes of use	2002 intrastate long distance revenue

OPERATIONAL ISSUES

65. Please state whether [company] alleges that Qwest has performed deficiently in providing [company] with hot cuts, collocation, provisioning of loops, provisioning of transport, CLEC-to-ILEC cross connects, or CLEC-to-CLEC cross-connects in [state] at any time since June 2001. For any such allegations, please provide a complete description of all facts that [company] relies upon, and produce all documents that relate in any way to the allegation.

66. Please provide the number of UNE-P orders that [company] expects to place with any local exchange carriers in [state] in the next 12 months. Please produce all documents that reflect or relate to these forecasts.

67. Please provide the number of UNE-L orders that [company] expects to place with any local exchange carriers in [state] in the next 12 months. Please produce all documents that reflect or relate to these forecasts.

68. If the state commission determines that competitive carriers are not impaired without access to switching in the mass market, provide projections of the number of UNE-L orders and/or conversions you would anticipate over the first 12 months after the effective date of the decision.

69. How many CLEC-to-CLEC cross-connects has [company] performed in [state] since June 2001? How many CLEC-to-CLEC cross-connects does [company] maintain in [state] at present?

70. Describe all activities [company] must perform on its side of the network to complete an ILEC to CLEC hot cut, and identify all costs associated with these activities. Produce all data and documents that support your response. To the extent [company's] response would differ based on whether it performed a basic or a coordinated hot cut, please provide an itemization of the cost differences.