|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Central Office Code (NXX) Assignment Request  Part 1 December 9, 2005** | | | | | | | |
|  | | | | | | | |
| Tracking Number: | 360-SALKUM-WA-616603 | | | | | | |
|  | Full NXX: LRN |  |  |  |  |  |  |
| **Type of Application:** | **New** | **Change** 1 | **Delete** |  |  |  |  |
|  | | | | | | | |
| **1.0 GENERAL INFORMATION** | | | | | | | |
| **1.1** Contact Information: | | | | | | | |
|  | | | | | | | |
| Code Applicant: | | | | | | | |
| Company/Entity Name: | MCDANIEL TELEPHONE CO. | | | | | | |
| Headquarters Address: | 525 Junction Rd | | | | | | |
| City, State, Zip: | Madison ,WI ,53717 | | | | | | |
| Contact Name: | Paul Nejedlo | | | | | | |
| Contact Address: | 525 Junction Rd | | | | | | |
| City,State,Zip: | Madison, WI, 53717 | | | | | | |
| Phone: | **608-664-4659**                  FAX:                            E-mail:   **paul.nejedlo@tdstelecom.com** | | | | | | |
| Code Administrator: 2 | |  |  |  |  |  |  |
| Name: | **David Morgan** | | | | | | |
| Address: | **46000 Center Oak Plaza** | | | | | | |
| City,State,Zip: | **Sterling ,VA ,20166** | | | | | | |
| Phone: | **571-434-5381** | | FAX:**571-434-5502** | |  |  |  |
|  |  | | | | | | |
| **1.2**    NPA: **360** | NXX: 3              LATA: **674**               OCN: 4 **2430**                    Parent Company's OCN(s) **0881** | | | |  |  |  |
| Switching Identification(Switch Entity/POI) 5 **SLKMWAXAGT0** | | | |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Locality/City/Wire Center:**SALKUM** | | | | Rate Center: 6 **SALKUM** | | | |
| Homing Tandem Operating Co: 7 **QWEST** | | Tandem Homing CLLI 8 :**STTLWA06C9T** | |  |  |  |  |
|  |  | | | | | | |
| **1.3**    Dates:   Date of Application:**03/04/2013** | | Request Effective Date: 9 10                              **08/01/2013** | | | |  |  |
|  |  |  |  |  |  |  |  |
|  |  | | | | | | |
| 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** | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
| |  |  |  | | --- | --- | --- | | 1.4     a)     Type of company/entity requesting the code:   **Incumbent Local Exchange Carrier (ILEC)** (LEC, IC, CMRS, Other) | | | | b) | Types of service: **Wireline** (e.g., Cellular - Type 2) |  | | c) | Code Assignment Preference (Optional) **360-585 360-745** |  | | d) | Codes that are undesirable, if any |  | | e) | Type of change(Mark **all** that apply) |  | |  | OCN-Intra-company 11 Switching Id Rate Center Tandem Homing CLLI |  | |  | OCN-Inter-company 12 Effective Date LATA Extend Reservation |  | | | | | | | | |
|  | | | | | | | |
| 1.5    Type of Request (Initial, growth, etc.) **Growth** | | | | | | | |
|  | | | | | | | |
| 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. | | | | | | | |
|  | | | | | | | |
| Pooling Indicator: 13 Yes No | | |  |  |  |  |  |
|  | | | | | | | |
| 1.6    NPA Jeopardy Criteria Apply:     Yes No | | | | |  |  |  |
|  | | | | | | | |
| 1.7    Code request for new service (Explain): | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
| 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/atis/clc/inc/incdocs.htm) as of the date of this application: 14 | | | | | | | |
|  | | | | | | | |
| **Paul Nejedlo** | | | | **Sr. Administrator** | | **03/04/2013** | |
| Signature of Code Applicant | | | | Title | | Date | |
|  | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
| 1 Identify type and reason for change(s) in Section 1.4(e). | | | | | | | |
| 2 A list of the current Code Administrator(s) who can provide assistance in completing this form is available upon request from NANPA. | | | | | | | |
| 3 The NXX field is required for any code request in which there is a change or the NXX is being returned. | | | | | | | |
| 4 Operating 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 Telcordia TM Routing Administration (TRA) on 732-699-6700. | | | | | | | |
| 5 This is an eleven-character descriptor of the switch provided by the owning entity for the purpose of routing calls. This is the eleven-character Telcordia TM COMMON LANGUAGE CLLI TM Location Identification of the applicant's switch or POI. (Telcordia and CLLI are trademarks and COMMON LANGUAGE is a registered trademarks of Telcordia Technologies, Inc.) | | | | | | | |
| 6 Rate Center name must be a tariffed Rate Center associated with toll billing. | | | | | | | |
| 7 Applies to any code applicant connecting to the Public Switched Telephone Network via a tandem owned by a different carrier. | | | | | | | |
| 8 This is an eleven-character descriptor provided by the owning entity for the purpose of routing calls. This must be the CLLI TM Location Identification Code of the switching entity/POI, and is the same on Part 2, Form 1, Page 2 of 2. | | | | | | | |
| 9 Code 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. | | | | | | | |
| 10 Requests for code assignment shall not be made more than six months prior to the requested effective date. | | | | | | | |
| 11 Select if you are the current Code Holder | | | | | | | |
| 12 Select if you are not the current Code Holder | | | | | | | |
| 13 The 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. | | | | | | | |
| 14 An incomplete form may result in delays in processing this request. | | | | | | | |