

Montana Public Service Commission



Brad Johnson - Chairman
Travis Kavulla - Vice Chairman
Roger Koopman - Commissioner
Bob Lake - Commissioner
Tony O'Donnell - Commissioner

Aug. 2, 2017

To: All Montana Eligible Telecommunications Carriers (ETCs)

Re: 2017 ETC Reporting Requirements and the Montana Public Service Commission (PSC)
2017 Annual October 1 Certification of ETCs to the Federal Communications
Commission for 2018 Universal Service Fund Support – PSC Docket No. N2017.4.34.

To Whom It May Concern:

Montana PSC October 1, 2017 ETC Certification to the FCC for 2018 High-Cost and Low Income Support

Per CFR 47 §54.314, consistent with USC 47 §254(e), on or before October 1, 2017, the PSC must certify Montana's ETCs to the Federal Communications Commission and the Universal Service Administration Company for receipt of 2018 federal universal service support.

For all existing Montana ETCs, the following procedure must be utilized. Each Montana ETC must file with the PSC, by August 25, 2017 the following:

1. Cover Letter - The cover letter must:
 - a. Clearly reference "Montana PSC 2017 ETC certification to the FCC for 2018 federal universal service support, PSC Docket No. N2017.4.34;
 - b. identify the ETC requesting certification;
 - c. identify the person within the ETC to whom PSC communications regarding the packet and requested certification should be directed;
 - d. the ETC's 6-digit study area code(s) (NECA code) for which certification is being sought; and
 - e. a request for 2017 certification by the PSC to the FCC for 2018 support.

2. Affidavit - The affidavit (statement under oath and notarized) must be by an individual authorized to do so for the requesting ETC. The PSC has prepared an affidavit form which contains the information required by the PSC. An example form is attached to this letter plus a blank copy of the affidavit. In addition, a blank affidavit form in Word format is available on the PSC Telecom website, along with a PDF of this letter of instruction.

ETCs requesting certification may file the above cover letter and affidavit prior to August 25, 2017 if they wish.

All filings in this docket shall be submitted electronically (e-filed) on the Commission's website at <http://psc.mt.gov> (see "Account Login/Registration" under "Electronic Documents" tab). The PSC certification cover letter and affidavit filing, in addition to the E-Filing, should also include the signed original cover letter and affidavit, along with two paper copies. The paper copies and any original should be physically delivered or mailed to the Commission's offices at: 1701 Prospect Avenue, P.O. Box 202601, Helena, Montana 59620-2601.

Questions on e-filing should be addressed to Mike Maas on 406-444-6174 or mmaas@mt.gov. Questions or comments on all other matters should be directed to Mike Dalton at mdalton2@mt.gov or 406-444-6185.

Sincerely,

Mike Dalton
Rate Analyst, Montana PSC

BEFORE THE PUBLIC SERVICE COMMISSION OF THE STATE OF MONTANA

IN THE MATTER OF THE 2017) REGULATORY DIVISION
Annual Certification of Montana Eligible)
Telecommunications Carriers for 2018) Docket No. N2017.4.34
High Cost and Low Income Support)

AFFIDAVIT OF Jane Doe

I, Jane Doe, being duly sworn upon oath, depose and state as follows:

1. I am Title of Company Name. I have personal knowledge of the facts stated herein.
2. Per CFR 47 §54.314(a), Company Name used all federal high-cost support in 2016, and will use 2018 support, only for the provision, maintenance and upgrading of facilities and services for which the support is intended (see CFR 47 §54.7 and §54.101).
3. Company Name has complied with all applicable reporting requirements per CFR 47 §54.313, §54.422, §54.304, and §54.1009(c).
4. Company Name does provide federal Lifeline and Tribal Linkup services to low income customers per the provisions of CFR 47, §54-Subpart E – Universal Service Support for Low-Income Consumers.

Dated this ____ day of _____, 2017

Jane Doe
Signature

State of _____
County of _____

Signed and sworn to before me on _____ by _____.
Date Print name of signer

Notary Signature

[Montana notaries must complete the following, if not part of stamp.]

Printed Name of Notary

Notary Public for the State of _____

Residing at _____

My Commission expires: _____, 20____

BEFORE THE PUBLIC SERVICE COMMISSION OF THE STATE OF MONTANA

IN THE MATTER OF THE 2017) REGULATORY DIVISION
Annual Certification of Montana Eligible)
Telecommunications Carriers for 2018) Docket No. N2017.4.34
High Cost and Low Income Support)

AFFIDAVIT OF _____

I, _____, being duly sworn upon oath, depose and state as follows:

1. I am _____ of _____. I have personal knowledge of the facts stated herein.

2. Per CFR 47 §54.314(a), _____ used all federal high-cost support in 2016, and will use 2018 support, only for the provision, maintenance and upgrading of facilities and services for which the support is intended (see CFR 47 §54.7 and §54.101).

3. _____ has complied with all applicable reporting requirements per CFR 47 §54.313, §54.422, §54.304, and §54.1009(c).

4. _____ does provide federal Lifeline and Tribal Linkup services to low income customers per the provisions of CFR 47, §54-Subpart E – Universal Service Support for Low-Income Consumers.

Dated this ____ day of _____, 2017

Signature

State of _____
County of _____

Signed and sworn to before me on _____ by _____.
Date Print name of signer

Notary Signature

[Montana notaries must complete the following, if not part of stamp.]

Printed Name of Notary

Notary Public for the State of _____

Residing at _____

My Commission expires: _____, 20____