

FILED

SEP 13 2016

INDIANA UTILITY REGULATORY COMMISSION



APPLICATION FOR A CERTIFICATE OF TERRITORIAL AUTHORITY FOR COMMUNICATIONS SERVICE PROVIDERS

State Form 52648 (R5 / 8-11) INDIANA UTILITY REGULATORY COMMISSION

Applicants are required to file an original and five (5) paper copies.

Cause No. 44850 (IURC use only)

PURSUANT TO IC 8-1-32.5-4, A COMMUNICATIONS SERVICE PROVIDER ("CSP") MEANS A PERSON OR ENTITY THAT OFFERS COMMUNICATIONS SERVICE TO CUSTOMERS IN INDIANA, WITHOUT REGARD TO THE TECHNOLOGY OR MEDIUM USED BY THE PERSON OR ENTITY TO PROVIDE THE COMMUNICATIONS SERVICE. THE TERM INCLUDES A PROVIDER OF COMMERCIAL MOBILE RADIO SERVICE (AS DEFINED IN 47 U.S.C. 332).

List each type of Communications Service which applicant proposes to offer in Indiana:

- TELECOMMUNICATIONS SERVICE AS DEFINED IN 47 U.S.C. 153(46) Interconnected VOIP

Please list each type of service, such as facilities-based local exchange; bundled resale of local exchange; commercial mobile radio service; interexchange; operator services or other.

- INFORMATION SERVICE AS DEFINED IN 153(20), WITHOUT REGARD TO THE TECHNOLOGY OR MEDIUM USED TO PROVIDE THE COMMUNICATIONS SERVICE. Internet Protocol Enabled Services

Please list each type of service, such as internet protocol enabled services; broadband service; advanced service (as defined in 47 CFR 51.5); or other.

- VIDEO SERVICE AS DEFINED IN IC 8-1-34-14 (Note: A Video Service Provider which does not currently have a video franchise (local or state) for the service area described above must obtain a state issued video franchise as specified in IC 8-1-34-16)

Please list any service areas in Indiana where Applicant offers service under a local franchise.

PURSUANT TO I.C. 8-1-32.5-6(e), A CSP THAT IS ONLY OFFERING A SERVICE(S) DESCRIBED IN I.C. 8-1-2.6-1.1 IS ONLY REQUIRED TO REPORT AND CERTIFY THE ACCURACY OF SOME OF THE INFORMATION REQUESTED IN THIS FORM. NOT ALL PORTIONS OF THE FORM ARE APPLICABLE TO SUCH A CSP. *SEE PAGE 2 FOR INSTRUCTIONS.

The following services are "described in I.C. 8-1-2.6-1.1":

- (1) advanced services (as defined in 47 CFR 51.5);
(2) broadband service, however defined or classified by the Federal Communications Commission;
(3) information service (as defined in 47 U.S.C. 153(20));
(4) Internet Protocol enabled retail services:
(A) regardless of how the service is classified by the Federal Communications Commission;
and
(B) except as expressly permitted under I.C. 8-1-2.8;
(5) commercial mobile service (as defined in 47 U.S.C. 332); or
(6) any service not commercially available on March 28, 2006.

In Indiana, will Applicant ONLY offer services described in I.C. 8-1-2.6-1.1?

Check one: YES NO

Please list the specific services, as described in I.C. 8-1-2.6-1.1, the Applicant proposes to offer:

Interconnected VOIP service as an IP enabled retail service considered as IP enabled retail service sold as telecommunications service.

PLEASE NOTE: All CSPs must complete a Verified Notice of Change form if the answer to this question changes at any time subsequent to completing this application form. The Notice of Change form is currently available on the Commission's website: www.in.gov/iurc.

*INSTRUCTIONS for providers offering ONLY a service(s) described in I.C. 8-1-2.6-1.1:

You DO NOT have to complete the following sections:

- Part II •Part IV.2.a •Part IV.2.b
- Some portions of Part VI may also not apply.

The following sections are required, unless otherwise noted:

- Part I.A •Part I.D •Part IV.1
- Part I.B •Part I.E. •Part IV.3
- Part I.C •Part III •Part V
- Selected portions of Part VI

I. APPLICANT CONTACT INFORMATION

A. Legal Name of Company: ITC Global Networks, LLC

B. Name(s) under which the company will be marketing services in Indiana:
(Company names, including any "doing business as" names, must be registered with Indiana Secretary of State)

C. Company Address:
4242 Mauch Chunk Rd, Coplay, PA 18037

Main Telephone Number: 855-226-0530 FAX Number: _____
E-mail Address: support@irontonglobal.com
Website Address: www.irontonglobal.com

D. Name, title, and other contact information of company's contact person for ongoing communications with the commission (including regulatory affairs and/or customer service information):

Name and Title Janet Brown
Telephone Number: 678-304-6472 FAX Number: _____
Mailing Address: 1595 Peachtree Parkway Ste. 204-337 Cumming GA 30041
Email Address: janet@gsaudits.com

E. Name, title, and other contact information of attorney or contact person for this application, if different from D. above:

Name and Title Same
Telephone Number: _____ FAX Number: _____
Mailing Address: _____
E-mail Address: _____

F. Parent Company's Legal Name, Address, and Telephone Number (if applicable):

(CSPs that will only offer a service(s) described in I.C. 8-1-2.6-1.1 are not required to provide their parent company information.)

II. Service Information

(Add additional sheets if necessary.)

A. Please describe the geographic area(s) for which the applicant seeks authority.

B. Please provide a description of each service area in Indiana in which the applicant initially proposes to offer communications service (i.e., county, city, or rate center). If the applicant is proposing to offer Video Service, will the service be authorized through a State or local franchise? If the applicant is a Video Service provider authorized through a local franchise authority, please provide the issuing franchise authority and expiration date.

C. Please provide a description of each type of communications service that the provider proposes to offer in each of the service areas identified in II B. above. The services listed should be consistent with the services marked at the top of Page 1.

D. For each type of service identified in C, please list whether the communications service will be offered only to residential customers, only to business customers or to both residential and business customers.

E. Please provide an estimated date of deployment (year and quarter) for each service area and each service type within that area for which the applicant seeks authority. The services listed should be consistent with the services marked at the top of Page 1.

F. Will applicant offer stand alone basic telecommunications service for a flat monthly rate pursuant to I.C. 8-1-2.6-0.1?

G. Does the applicant seek authorization to provide facilities-based local exchange? _____

H. Does the applicant seek authorization to offer interexchange services only? _____

I. Is applicant offering wholesale communications services, retail communications services, or both? _____

J. Will the applicant operate as a Local Cooperative Corporation pursuant to I.C. 8-1-17-3? _____

If yes, please submit three (3) original articles of incorporation as required by I.C. 8-1-17-5 et seq.¹

¹ The Commission is required to provide notice of CTA applications of local cooperative corporations to each facilities-based local exchange carrier operating in territory contiguous to the area in which the cooperative corporation proposes to render telephone service pursuant to IC 8-1-17-5(d).

K. Please list other states in which applicant is authorized to provide communications services and the types of services offered.

III. Additional Requirements²

Applicant further represents that it will:

- Comply with Indiana law (including but not limited to Title 8 of the Indiana Code) and IURC regulations (170 IAC 7) and applicable current and future Orders of the IURC.³
- Notify the Commission of any change in the legal name, address, control or status of the CTA, or service area (if applicable), pursuant to I.C. 8-1-32.5-12, using the CSP Notice of Change Form prescribed by the Commission. Such notification of change shall be provided to the Commission thirty (30) days prior to the occurrence of the change.
- Upon request, provide any other information the Commission is authorized to collect from a communications service provider under state or federal law pursuant to I.C. 8-1-2.6-13-9(E).
- Applicant represents that it will, at the time requested by the Commission, provide an annual report concerning communications services offered in each service area (county and ZIP code) in Indiana as required by I.C. 8-1-2.6-13(d)(9)(C) **Note:** This does not apply to CMRS providers.
- If applicable, file intrastate access tariffs, concurrences, and exceptions pursuant to the Commission's filing procedures and provide informational copies of interstate access tariffs.
- If applicable, provide the Commission with current and updated/corrected hyperlinks to the company's intrastate and interstate access tariffs, concurrences, and exceptions, consistent with the IURC's General Administrative Order (GAO) 1998-2.

IV. Attachments

The following information must be included with this application:

1. A copy of the Applicant's Certificate of Authority from the Indiana Secretary of State, authorizing the applicant to do business within the State of Indiana. (A tax statement or other documentation from the Indiana Department of Revenue is **not acceptable**.)
 - a. Applicants that are units of a municipal government, or are owned by a municipal government entity, may submit their local authorizing ordinance in lieu of the Secretary of State Certificate of Authority.
2. Information demonstrating the financial, managerial and technical ability to provide each communication service identified in the application.
 - a. The applicant's most recent financial statement or balance sheet or that of the parent company if separate Indiana operations have not yet been established. Applicants that are municipalities may submit their local budget.
 - b. Biographies of the applicant's corporate officers responsible for Indiana indicating managerial and technical qualifications.
(Attachment 2a and 2b are not required for CSPs that will "only offer a service(s) described in IC 8-1-2.6-1.1.")
3. A statement signed under penalty of perjury by an officer or another person authorized to bind the applicant (see attached affidavit).

Although an evidentiary hearing before the Commission is not required, the Commission shall hold an evidentiary hearing, if one is requested pursuant to IC 8-1-32.5-9(a). Any hearing shall follow the statutory provisions of IC 8-1-32.5-9(b).⁴

² Part III applies to all communications service providers, unless explicitly exempted pursuant to Indiana law and as otherwise noted herein.

³ Telecommunications Service Providers and Video Service Providers are subject to enforcement remedies for prohibited actions pursuant to IC 8-1-29.5.

⁴ The FCC determines market entry of CMRS providers pursuant to 47 CFR Chapter 1 Part 13.

V. Application Verification

I affirm under the penalties of perjury that the above representations made in this application are true.
(*Must be signed by an officer of the company.*)

Patricia L Stewart August 30, 2016
Signature and Date (*month, day, year*)

Patricia L. Stewart, Secretary/Treasurer
Name and Title (*printed or typed*)

AFFIDAVIT⁵

I, Patricia L. Stewart (*print name*), as an authorized corporate officer or person authorized to bind ITC Global Networks, LLC (*company name*), affirm under penalty of perjury that:

a) the applicant has filed or will timely file with the Federal Communications Commission ("FCC") all forms required by the FCC;

b) the applicant agrees to comply with customer notification requirements of the Commission pursuant to I.C. 8-1-32.5-6(b)(3)(B) and 8-1-32.5-11(b) (not applicable to CMRS providers per I.C. 8-1-32.5-11(b));

c) the applicant (including CMRS providers⁶) agrees to update the information provided in the application on a regular basis pursuant to I.C. 8-1-32.5-12;

d) the applicant agrees to notify the Commission when the applicant commences offering communications service in each service area identified in the application (Pursuant to I.C. 8-1-32.5-6(e), this requirement is not applicable to CSPs that only offer a service(s) described in I.C. 8-1-2.6-1.1.);

e) the applicant agrees to pay any lawful rate or charge for switched and special access services, as required under any:

- applicable interconnection agreement; or
- lawful tariff or order approved or issued by a regulatory body having jurisdiction.

f) the applicant agrees to report, at the time requested by the Commission, information required under I.C. 8-1-2.6-13(d)(9) *et seq.* (This requirement is not applicable to CMRS providers, per I.C. 8-1-2.6-13(d)(9).); and

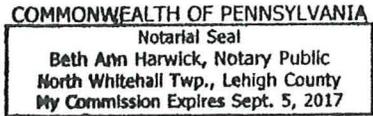
g) applicant further represents that it will provide an annual report concerning communications services offered in each service area (county, ZIP code and census tract) in Indiana as required by I.C. 8-1-2.6-13(d)(9)(C). (Not applicable to CMRS providers, per I.C. 8-1-2.6-13(d)(9).

Patricia L. Stewart
 Signature
 Secretary/Treasurer
 Title
 August 30, 2016
 Date (*month, day, year*)

Subscribed and Sworn to before me, a Notary Public, this 1 day of September, A.D. 2016

Beth Ann Harwick
 Signature
Beth Ann Harwick
 Printed Name

My Commission Expires: September 5, 2017
 My County of Residence: Lehigh



⁵See IC 8-1-32.5-6(b)(3).
⁶There is an exception in IC 8-1-32.5-12-6 to the information that CMRS providers must provide. This exception does not apply to the other subsections in IC 8-1-32.5-12.



APPLICATION FOR CERTIFICATE OF AUTHORITY OF A FOREIGN LIMITED LIABILITY COMPANY

State Form 49464 (R2 / 1-09)
Approved by State Board of Accounts, 2007
Indiana Code 23-18-11-4 et seq.

**TODD ROKITA
SECRETARY OF STATE**

Mail to the following address:
BUSINESS SERVICES DIVISION
302 W. Washington St., Room E018
Indianapolis, IN 46204
Telephone: (317) 232-6576

RECEIVED

2013 FEB -4

AMOUNT: \$ 90.00

Make check or money order
payable to Secretary of State

- NOTES:**
1. An Original Certificate of Existence duly authenticated by the proper authority from corporation's domiciliary state within the last sixty (60) days must be submitted with this application.
 2. A Registered Agent with an Indiana street address (not a PO BOX) must be listed in ARTICLE II.

- INSTRUCTIONS:**
1. Use 8-1/2" x 11" white paper for attachments.
 2. Present original and one (1) copy to the address on upper right corner of this form.
 3. Please TYPE or PRINT.
 4. Please visit our office on the web at www.sos.in.gov.

Indiana Secretary of State Packet: 2013020500267 Filing Date: 02/04/2013 Effective Date: 02/04/2013	APPLICATION FOR CERTIFICATE OF AUTHORITY OF ITC Global Networks, LLC A FOREIGN LLC TO TRANSACT BUSINESS IN THE STATE OF INDIANA	APPROVED AND FILED <i>Cornie Hansen</i> IND. SECRETARY OF STATE
The undersigned manager or member of the above _____ Pennsylvania _____ LLC (State of Domicile) desiring to effectuate the admittance of the LLC to transact business in the State of Indiana, under the name of _____ _____ certifies the following facts: (if using a fictitious business name, please specify the name above)		

Name of LLC (This must be identical to name shown in Articles of Organization and Amendments thereto.) ITC Global Networks, LLC
Address of the principal office of LLC (number and street, city, state, and ZIP code) 4242 Mauch Chunk Road, Coplay, PA 18037
Name of the registered agent of the LLC Northwest Registered Agent LLC
Indiana address of the registered office of LLC (number and street, city, state, and ZIP code) 101 West Ohio Street, STE 2000B, Indianapolis, IN 46204
Date of organization in domiciliary state (month, day, year) 03/16/212
Expected period of duration listed in the Articles of Organization (month, day, year or perpetual) perpetual

The Articles of Organization state that the LLC is to be managed by its members.
 The Articles of Organization provide for a manager or managers.

In witness whereof, the undersigned being the _____ Manager _____ of said LLC executes this
 (Manager or member)

Application for Certificate of Authority, and verifies subject to penalties of perjury, that the facts contained herein are true this
 _____ 17 _____ day of _____ December _____, 20 12 _____.

Signature 	Printed name Timothy A. Hausman
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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

DECEMBER 13, 2012

RECEIVED
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Indiana Secretary of State
Packet: 2013020500267
Filing Date: 02/04/2013
Effective Date: 02/04/2013

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

ITC Global Networks, LLC

Is duly organized as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Carol A. Aichele

Secretary of the Commonwealth

State of Indiana
Office of the Secretary of State

CERTIFICATE OF AUTHORITY
of
ITC GLOBAL NETWORKS, LLC

I, CONNIE LAWSON, Secretary of State of Indiana, hereby certify that Application for Certificate of Authority of the above Pennsylvania Foreign Limited Liability Company (LLC) has been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Business Flexibility Act.

Indiana Secretary of State
Packet: 2013020500267
Filing Date: 02/04/2013
Effective Date: 02/04/2013

NOW, THEREFORE, with this document I certify that said transaction will become effective Monday, February 04, 2013.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, February 4, 2013.

Connie Lawson

CONNIE LAWSON,
SECRETARY OF STATE

2013020500267 / 2013020580619