BEFORE THE NEBRASKA PUBLIC SERVICE COMMISSION

In t	the Matter of the Application)	
of)	
_	(Applicant Name)	
	·)	Application No.
(City and State of Residence)	
seek	king authority to receive	(PSC use only)
adva	anced telecommunications)	(roc use only)
capa	ability service from the	
	Exchange)	
of)	
_	(Telephone Company Name)	
	COMES NOW(Applicant Name)	for application herein and
	(Applicant Name)	
repr	resents to the Nebraska Public Se	ervice Commission as follows:
1.	Applicant is a(n) individual /	business. (Circle one)
2.	The address of the location whe	ere Applicant seeks advanced
tele	ecommunications service is as fol	lows.
CCIC	de les de	
		
		
3.	The Applicant's current mailing	g address is as follows:
		
	(Leave blank if same as abo	ove)

4. The legal description of the location at which Applicant
seeks advanced telecommunications capability service is:
(Please provide Section, Range, and Township number)
5. Is the Applicant currently receiving advanced
telecommunications capability service at the location listed in
paragraph 2? YES / NO (circle one)
If yes, please indicate the company providing service:
(Telephone Company / Telecommunications Carrier Name)
6. Applicant is not receiving, and is not able to receive,
reasonable advanced telecommunications capability service from
for the following reason(s): (Telephone Company)

- 7. Applicant states the revision of the exchange service area or areas required to grant this application is economically sound and will not impair the capability of the telephone company or companies affected to serve the remaining subscribers in any affected exchanges. Applicant further states that the revision of the exchange service area will not impose an undue and unreasonable technological or engineering burden on any affected telecommunications company.
- 8. The Applicant has read and understands the following:
 Applicant understands that if the application is approved by the
 Commission, the Applicant may be asked to pay such construction
 and other costs and rates as are fair and equitable. The Applicant
 understands that he or she may also be asked to reimburse the
 affected telecommunications company for any necessary loss of
 investment in existing property as determined by the Commission.

REQUIRED - Initial here: _____

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WHEREFORE, Applicant prays that after due notice and, if required by law, hearing, the Commission grant his or her application and modify the applicable exchange service areas as requested.

Respectfully submitted,
(Applicant Signature)
(Printed Name)
(Applicant Title, if signing on behalm of a business entity)

NOTE: The Application Fee (\$50 for individuals, \$250 for certificated carriers) must be submitted to the Commission before the application can be processed.

Completed applications, with payment, can be submitted to the Commission at the following address:

Nebraska Public Service Commission Attn: Communications Department 300 The Atrium 1200 N Street Lincoln, NE 68508

Questions regarding this application form should be directed to the Public Service Commission Communications Department at (402) 471-3101.

Application No	(PSC Use Only)	Page 5
OTATE OF NEDDAGVA	,	
STATE OF NEBRASKA)	
COUNTY OF)	
	, being first duly s	worn, deposes and
states that he or she		
representative thereof,	and has read the abo	ove and foregoing
application, knows the co	ontents thereof and state	es that the matters
and facts therein contain	ned are true, as he or sh	e verily believes.
	(Applicant Signatur	re)
Subscribed and sworn	to before me this	day of
	·	
	(Notary Public)	
	(110001 1 00110)	