

**STATE OF VERMONT
PUBLIC SERVICE BOARD**

**TELECOMMUNICATIONS
BILLING AGGREGATOR REGISTRATION FORM**

In completing the registration form, applicants shall provide the following information (information may be provided in attachments to this application, if necessary)

1. Applicant's legal name, as registered with the Vermont Secretary of State: _____

2. Name(s) under which Applicant will do business in Vermont: _____

3. Applicant's business street address:

Address

City or town

State

ZIP Code

4. Applicant's mailing address, if different:

Address

City or town

State

ZIP Code

5. Contact person, address, and telephone numbers (including fax number and e-mail address, if available) for regulatory matters:

Name

Address

City or town

State

ZIP Code

Telephone number

Fax Number

E-mail Address

6. Name(s) of billing agent(s)¹ in Vermont authorized to bill for applicant:

7. Contact person for this application, name, address, and phone numbers (including fax number):

Name

Address

| | | |
|--------------|-------|----------|
| City or Town | State | ZIP Code |
|--------------|-------|----------|

| | |
|------------------|------------|
| Telephone Number | Fax Number |
|------------------|------------|

8. List other state regulatory agencies where Applicant is registered:

9. List other states where Applicant is doing business, but not registered with the regulatory agency:

10. Name, address and title of each officer and director, partner, or similar officer:

Name and Position

Address

| | | |
|--------------|-------|----------|
| City or town | State | ZIP Code |
|--------------|-------|----------|

1. Vermont statute defines a billing agent as a local exchange carrier or other person offering telecommunications service who includes in a bill it sends to a customer a charge for a product or service offered by a service provider.

Name and Position

Address

City or town State ZIP Code

Name and Position

Address

City or Town State ZIP Code

11. Does the applicant, or any of the individuals identified in question 10 above, have any pending or concluded administrative, civil, or criminal legal actions that relate to or arise from billing transactions, business fraud, and unfair or deceptive sales practices? If yes, please describe:

12. For existing billing aggregators², prior to July 1, 2000, please provide a listing of the service providers who utilize your billing service:

2. Vermont statutes define a billing aggregator as any person, other than a service provider, who forwards the charge for a product or service offered by a service provider to a billing agent.

Attestation:

The undersigned agree to comply with Vermont statutes and Vermont Public Service Board orders regarding billing aggregators and attest that the undersigned has examined the foregoing information provided by _____ and that the information is correct and complete.

By: _____
(Officer of Company)

[PRINT NAME]

This document was signed in my presence on the _____ day of

_____, _____.

Notary Public

[PRINT NAME]