

**APPLICATION for VIDEO SERVICE AUTHORIZATION (VSA)**

**Applicant's Legal Name:**

The Applicant's company name can be the Applicant's legal name or an assumed name (i.e. DBA) as long as the name listed here is the same as registered with the Ohio Secretary of State's Office. The holder of this VSA must use only the name or assumed names set forth in this Application, on bills, advertisements, or communications with the public and the Ohio Department of Commerce. Name changes or additional assumed names require notification to the Ohio Department of Commerce.

**Applicant's Assumed Name or Names (DBA):**

Names under which Applicant will provide video service in the State of Ohio.

To insert a single DBA you must hit the add button before advancing to the next section.

Add

Remove Checked

**Applicant's Principal Place of Business:**

Street Address

Street Address

City  State  Zip Code

Phone Number (  ) -

**Names and Titles of Principal Officers:**

(e.g., corporate officers, partners, or members depending on the structure of the organization)

First Name	Last Name	Title
<input type="text"/>	<input type="text"/>	<input type="text"/>

Add

Remove Checked

**Contact Information for Person Authorized to Receive Information Regarding this Application:**

First Name

Last Name

Title

Address

Address

City

State

Zip Code

Telephone

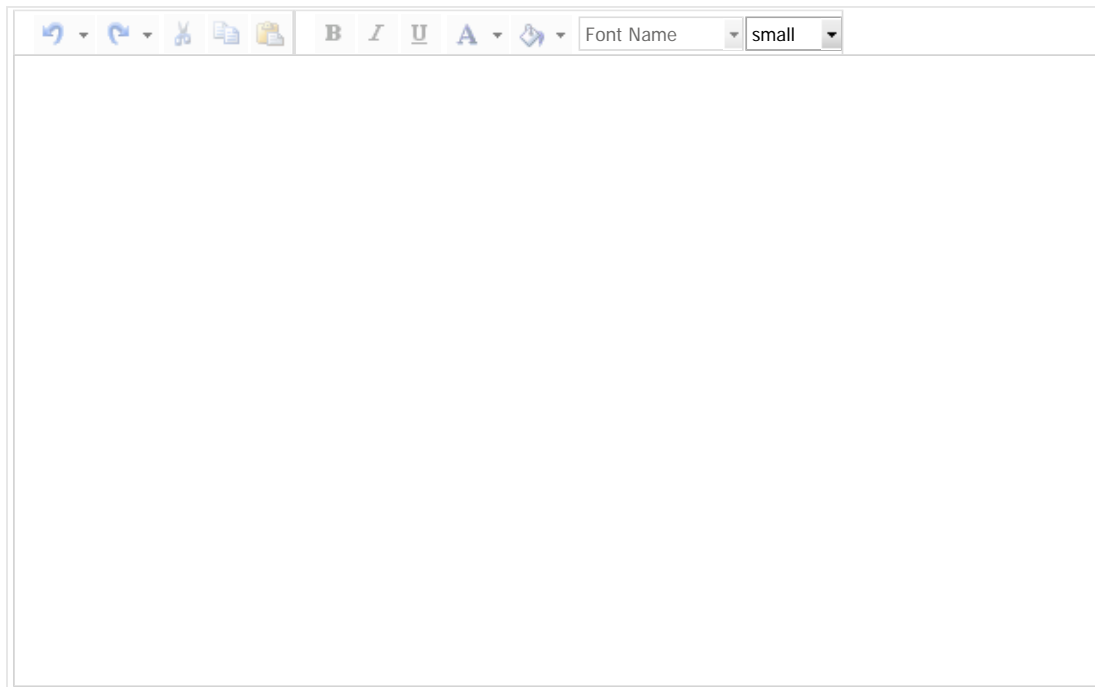
Fax

E-Mail Address

Retype E-Mail Address

**Technology Information:**

Provide a general description of the type(s) of technology that will be used to deliver the video programming including wireline, wireless, or any other alternative technology, subject, as applicable to Section 1332.29 of the Ohio Revised Code.



**Complaint Contact Information:**

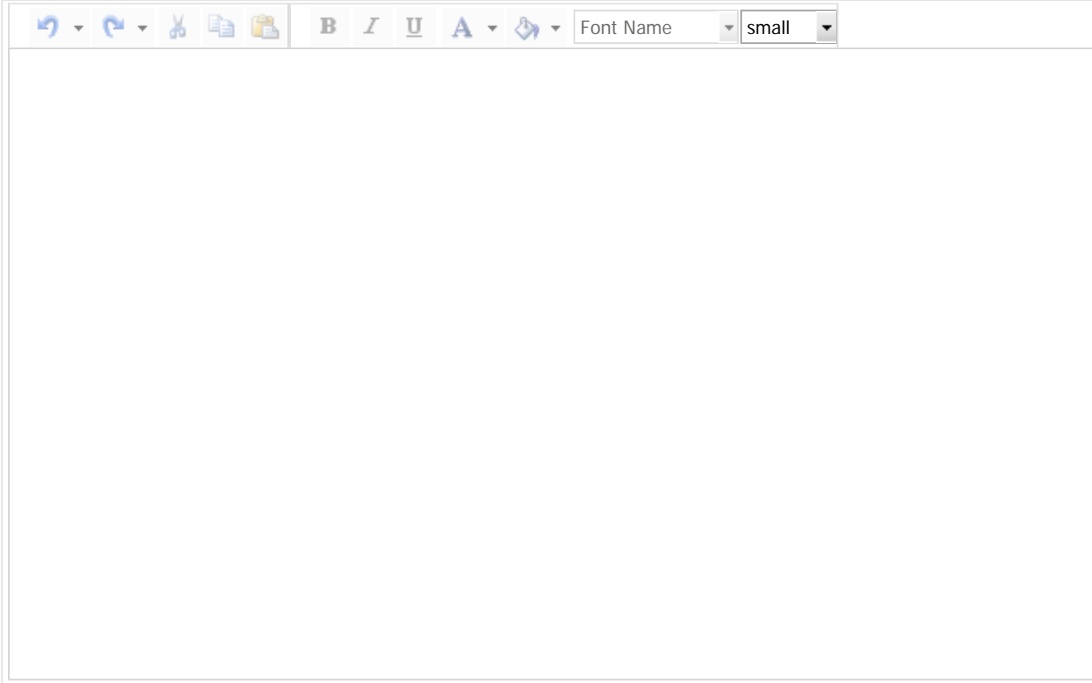
Provide contact information for the person to whom customer complaints or disputes received at the Department of Commerce should be directed by Commerce staff.

First Name	<input type="text"/>
Last Name	<input type="text"/>
Title	<input type="text"/>
Address	<input type="text"/>
Address	<input type="text"/>
City	<input type="text"/>
State	<input type="text" value="OH"/>
Zip Code	<input type="text" value="##### - ###"/>
Telephone	<input type="text" value="( ) -"/>
Fax	<input type="text" value="( ) -"/>
E-Mail Address	<input type="text"/>
Local or Toll-Free Customer Complaint Hotline Number	<input type="text" value="( ) -"/>

**Customer Complaint Handling Process:**


Provide description of the Applicant's customer complaint handling process, including policies on addressing customer service issues, billing adjustments and communications with government officials regarding customer complaints below, and by uploading copies of customer invoices, disconnect notices, customer terms and conditions, and customer welcome letters on the next page.

Policies on Addressing Customer Service Issues



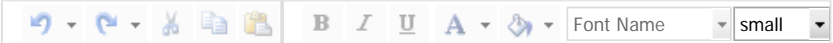
The image shows a rich text editor toolbar. From left to right, it contains: an undo icon, a redo icon, a cut icon, a copy icon, a paste icon, a bold icon (B), an italic icon (I), an underline icon (U), a text color icon (A), and a link icon. To the right of these icons is a 'Font Name' dropdown menu currently displaying 'small'.

### Policies on Billing Adjustments



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### Policies on Communication with Government Officials

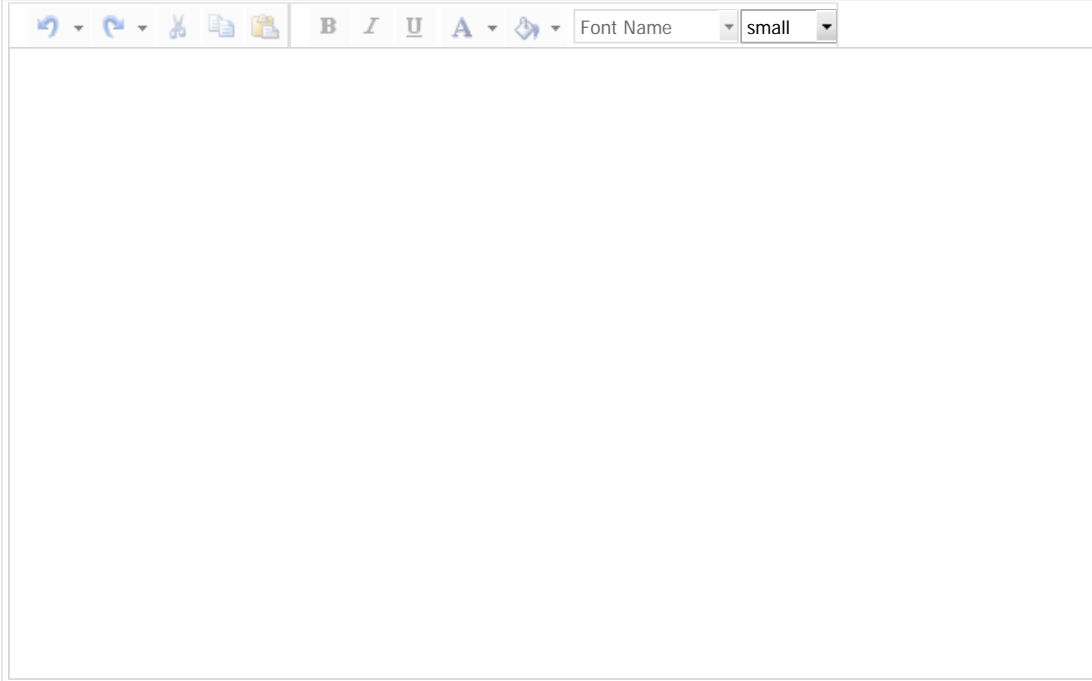


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### **Geographical and Political Boundaries:**

Provide the specifications of the geographical and political boundaries of the Applicant's proposed video service area by submitting a written description below, and by uploading a GIS file in ESRI compatible (.E00 or .shp format) on the next page.

Description:



The image shows a rich text editor toolbar. From left to right, it contains: an undo icon, a redo icon, a cut icon, a copy icon, a paste icon, a bold icon (B), an italic icon (I), an underline icon (U), a text color icon (A), a link icon, a font name dropdown menu currently showing 'small', and a font size dropdown menu. Below the toolbar is a large, empty rectangular text area.

**Franchise Information:**

Is the Applicant applying for a VSA under one (or more) of the criteria referenced in 1332.23(B)(2) of the Ohio Revised Code?

- Yes  No

Provide a list of the franchises to be terminated by this Application by uploading on the next page a completed Franchise Termination Spreadsheet provided on the instruction page.

**Trade Secret Information:**

Do you consider any information on this Application as trade secret information?

- Yes  No

If the Applicant believes that any of the required information may appropriately be treated as confidential pursuant to section 1332.25(G) of the Ohio Revised Code, the Applicant should make that request to the Director of Commerce in writing. The Applicant's request for a finding of confidentiality must include the following information: 1) the nature of the confidential information; 2) the reasons why the information should be treated as confidential information pursuant to section 149.43 of the Ohio Revised Code; 3) and the efforts the Applicant has made to maintain the confidentiality of the information. It should be noted, however, that the Application will not be considered to be complete until the Director of Commerce receives the required information.

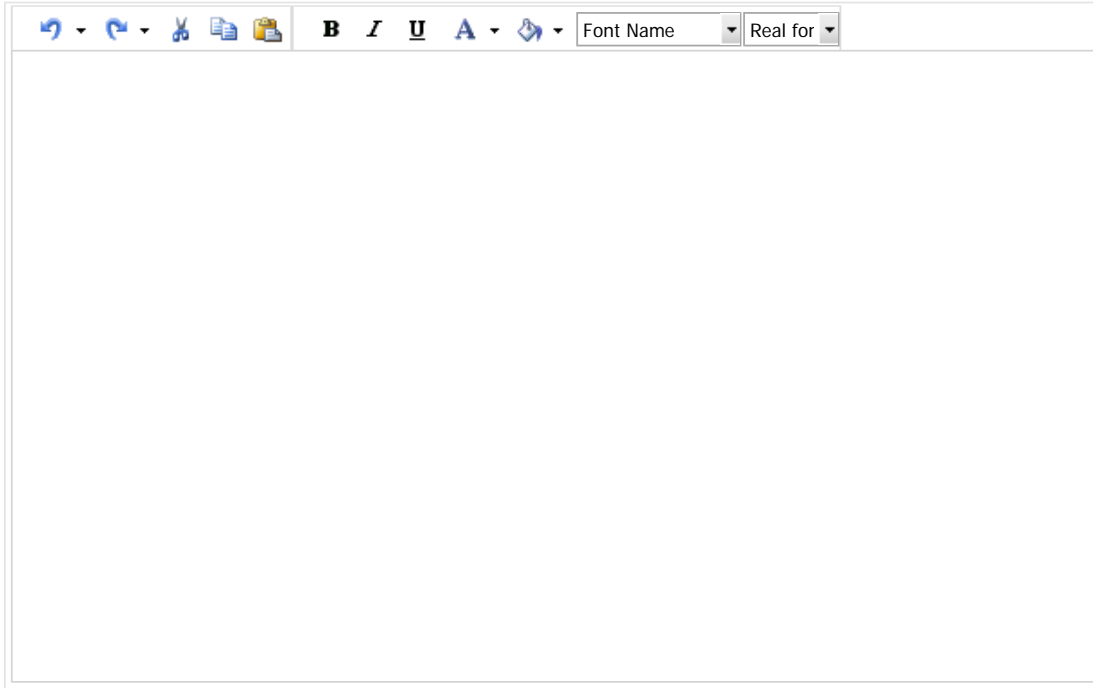
Nature of the Confidential Information

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Reasons why the Information Should be Treated as Confidential Information

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Efforts the Applicant has made to Maintain the Confidentiality of the Information



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**ATTESTATION for VIDEO SERVICE AUTHORIZATION (VSA)**

I hereby attest that I am an Officer, Member, a General Partner or other authorized representative of:

I swear or affirm that I have personal knowledge of the facts stated in the Application for Video Service Authorization submitted to the Ohio Department of Commerce, that I am competent to testify to them, and that I have the authority to make this Application on behalf of and to bind the Applicant. I further swear or affirm that:

- A. has filed or will timely file with the Federal Communications Commission all forms required by that agency in advance of offering video service in the State of Ohio;
- B. agrees to comply with all applicable federal and state statutes, rules, and regulations applicable to the operation of the Applicant's video service system;
- C. the Applicant is legally, financially, and technically qualified to provide video service.

I swear or affirm that all of the statements and representations made in the submission of the Application are true and correct. I also swear or affirm that the Applicant understands and will comply with all the requirements of the law applicable to a Video Service Provider's State-issued Authorization.

Signature

Title


In order to complete the Application process you must upload the GIS files, attach the requested customer documents and the completed Franchise Termination Spreadsheet, if applicable. **At this point, please review the Application for accuracy before continuing to the next page to upload the requested files. Once you choose to continue, you will be unable to make any changes to the Application.**

**Continue and Upload Files**

## **VSA COMPLIANCE INFORMATION FILE UPLOAD**

### **CUSTOMER COMPLAINT HANDLING PROCESS**

**Upload document: Copies of customer invoices, disconnect notices, customer terms and conditions, and customer welcome letters.**



- Upload File    Mail information on CD/DVD with payment.

**Note: Only files in a .pdf or .doc format can be uploaded or submitted by mail.**

**Upload Files**

## **VSA GEOGRAPHICAL AND POLITICAL BOUNDARIES INFORMATION FILE UPLOAD**

### **GEOGRAPHICAL AND POLITICAL BOUNDARIES**

**Upload document: Specifications of the geographical and political boundaries of the applicant's proposed video service area in a GIS file which is ESRI compatible.**

Upload  
File

Include information on CD/DVD with  
payment.

**Note: Only files in a .shp or .E00 format can be uploaded or submitted by mail.**

**Upload Files**

**VSA TERMINATION OF FRANCHISES INFORMATION  
FILE UPLOAD**

**TERMINATION OF FRANCHISES**

Upload document: List of franchises that will be terminated due to this Application with reason of termination.

- Upload File  Mail information on CD/DVD with payment.

**Note: Only files in .xls format can be uploaded or submitted by mail.**

**Upload Files**