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January 30, 2017

Florida Public Service Commission  
Attn: Ms. Carlotta Stauffer  
Office of the Commission Clerk  
2540 Shumard Oak Boulevard  
Tallahassee, FL 32399-0850

**Via Electronic Filing**

Re: Cox Florida Telcom, L.P. ("Cox")  
CLEC No. TA027  
FCC Form 555: Year 2016 Annual Lifeline Eligible Telecommunications Carrier Certification Form

Dear Ms. Stauffer:

Cox submits herewith the attached Annual Lifeline Eligible Telecommunications Carrier Certification Form (FCC Form 555) for Year 2016, pursuant to FCC Rule §54.416(b), CFR, requiring Eligible Telecommunications Carriers (ETCs) to submit a copy of the results of their annual Lifeline recertification efforts to the state commission for subscribers residing in the state where the state commission has designated the company as an ETC. As per directions from Commission Staff, please place this in the undocketed file.

Should you have any questions regarding this filing, please do not hesitate to contact me.

Sincerely,  
  
Leslie McLaughlin, Analyst, SE Region  
Assistant to Martin J. Corcoran, Director, Regulatory Affairs

Enclosure

CC: Derrick Hanson, Director, Cox Law & Policy, Regulatory Operations

**Annual Lifeline Eligible Telecommunications Carrier Certification Form**

All carriers must complete all or portions of all sections

Form must be submitted to USAC and filed with the Federal Communications Commission

**IMPORTANT: PLEASE READ INSTRUCTIONS FIRST**

*Deadline: January 31<sup>st</sup> (Annually)*

<u>219019</u>		<u>143002897</u>
Study Area Code (SAC)		Service Provider Identification Number (SPIN)
<i>(An Eligible Telecommunications Carrier (ETC) must provide a certification form for each SAC through which it provides Lifeline service).</i>		
<u>2016</u>	<u>FL</u>	<u>Cox Florida Telcom LP</u>
Recertification Year	State	ETC Name
<u>Cox Digital Telephone Lifeline Service</u>		<u>Cox Communications, Inc.</u>
DBA, Marketing, or Other Branding Name		Holding Company Name
<i>(If same as ETC name, list "N/A" Do not leave blank)</i>		<i>(If same as ETC name, list "N/A" Do not leave blank)</i>

**Does the reporting company have affiliated ETCs?**

Yes

No

*Provide a list of all ETCs that are affiliated with the reporting ETC, using page 4 and additional sheets if necessary. Affiliation shall be determined in accordance with Section 3(2) of the Communications Act. That Section defines "affiliate" as "a person that (directly or indirectly) owns or controls, is owned or controlled by, or is under common ownership or control with, another person." 47 U.S.C. § 153(2). See also 47 C.F.R. § 76.1200.*

Affiliated ETC's SAC	Affiliated ETC's Name

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate by-laws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

**Section 1: Initial Certification** *All ETCs must complete this section*

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial jp

**Section 2: Annual Recertification**

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	B	C	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year <i>(February data month)</i>	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were <u>initially</u> enrolled in the current Form 555 calendar year <i>(These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)</i>	Number of subscribers de-enrolled prior to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
626	0	68	68	490

**Recertification Results:**

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non-responding subscribers	Number of subscribers responding that they are no longer eligible <i>(This should be a subset of Block G.)</i>	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
0	0	0	0	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
490	291

**Note:** If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

**Certification:**

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial jp

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on: USAC. (List database or name of administrator here) Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial jp

OR

C) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial \_\_\_\_\_

**Section 3: De-enroll Percentage**

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

<b>M = (F+K)</b>	<b>N = (J+L)</b>	<b>O = ((N ÷ M) * 100)</b>
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC <i>(This should equal the number reported in Block E)</i>	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
490	291	59.39%

**Section 4: ETCs Subject to the Non-Usage Requirements**

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes  No

If yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

<b>P</b>	<b>Q</b>
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

**Signature Block**

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.	
Signed, <u>Certified Online</u> Signature of Officer <u>jojava.philpott@cox.com</u> Email Address of Officer <u>Derrick Hanson</u> Person Completing This Certification Form	Joiava Philpott, VP Regulatory Affairs  Printed Name and Title of Officer <u>01/23/2017</u> Date <u>404-269-5455</u> Contact Phone Number

Welcome to the FCC's new Electronic Comment Filing System, ECFS 3.0, launched June 20, 2016. This system contains the entire history of docketed proceedings from 1992 to the present. New submissions here will be added to the public record. We will continue to refine this system in response to user feedback. Please tell us about your experience using this system by sending an email to [ECFSfeedback@fcc.gov](mailto:ECFSfeedback@fcc.gov) (mailto:ECFSfeedback@fcc.gov).

## Submit a Filing

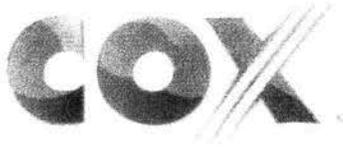
1 Filing 2 Review 3 Confirmation

<b>Proceeding:</b>	14-171
<b>Confirmation #:</b>	20170124228038923
<b>Submitted:</b>	Jan 24, 2017 8:21:21 AM
<b>Status:</b>	SUBMITTED
<b>Name(s) of Filer(s)</b>	Cox Communications, Inc
<b>Law Firm(s)</b>	
<b>Attorney/Author Name(s)</b>	
<b>Primary Contact Email</b>	diane.hsu@cox.com
<b>Type of Filing</b>	COMPLIANCE FILING
<b>File Number</b>	
<b>Report Number</b>	
<b>Bureau ID Number</b>	
<b>Address of</b>	Filer
<b>Address</b>	6205-B Peachtree Dunwoody Rd , Atlanta, GA, 30328
<b>Email Confirmation</b>	Yes

Submit Another  (/ecfs/filings)

Federal Communications Commission  
 445 12th Street SW, Washington, DC 20554  
 Phone: 1-888-225-5322  
 TTY: 1-888-835-5322  
 Videophone: 1-844-432-2275  
 Fax: 1-866-418-0232

Contact Us (<https://www.fcc.gov/contact-us>)



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 Atlanta, GA 30328  
 404.269.0983 tel 404-269-0539 fax  
 joiava.philpott@cox.com

**Joiava Philpott**  
 VICE PRESIDENT

January 24, 2017

*VIA ECFS*

Ms. Marlene H. Dortch  
 Office of the Secretary  
 Federal Communications Commission  
 445 12<sup>th</sup> Street, SW  
 Washington, DC 20554

**Re: Cox Communications, Inc. and Its Affiliates  
 WC Docket No. 14-171  
 Annual Certification Requirement for Lifeline Program  
 Pursuant to 47 C.F.R. 54.405(e)(3), 54.416(b)**

Dear Ms. Dortch:

Pursuant to the above-referenced rules and the Wireline Competition Bureau's December 2, 2014 Public Notice, Cox Communications, Inc. hereby submits FCC Form 555 for each of its affiliates that participates in the Lifeline program. Forms are submitted herewith for the following companies:

- |                              |                               |
|------------------------------|-------------------------------|
| Cox Arizona Telecom, LLC     | Cox Kansas Telecom, LLC       |
| Cox Arkansas Telecom, LLC    | Cox Louisiana Telecom, LLC    |
| Cox California Telecom, LLC  | Cox Nebraska Telecom, LLC     |
| Cox Connecticut Telecom, LLC | Cox Nevada Telecom, LLC       |
| Cox Florida Telecom, LP      | Cox Oklahoma Telecom, LLC     |
| Cox Georgia Telecom, LLC     | Cox Rhode Island Telecom, LLC |
| Cox Iowa Telecom, LLC        | Cox Virginia Telecom, LLC     |

Please inform me if any questions should arise in connection with this submission.

Respectfully Submitted,

Joiava Philpott  
 Vice President, Regulatory Affairs

Attachments (14)

cc: Barry Ohlson

