

WC Docket Nos. - 10-90, 11-42

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FCC Mail Room

FCC Form 481 – Carrier Annual Reporting

North State Telephone Company D.B.A. North State Communications

REDACTED – FOR PUBLIC INSPECTION

(100) Service Quality Improvement Reporting Data Collection Form FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010> Study Area Code 230491
 <015> Study Area Name N. ST. DBA N. ST.COMM
 <020> Program Year 2014
 <030> Contact Name - Person USAC should contact regarding this data William C. Farabow
 <035> Contact Telephone Number - Number of person identified in data line <030> 336-821-4446
 <039> Contact Email Address - Email Address of person identified in data line <030> clint.farabow@nscom.com

<110> Has your company received its ETC certification from the FCC? (yes / no)
 If your answer to Line <110> is yes, do you have an existing §54.202(a) "5
 <111> year plan" filed with the FCC? (yes / no)

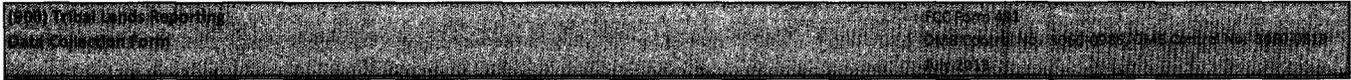
If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a){1}. If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

Name of Attached Document (.pdf)

Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

<113> Maps detailing progress towards meeting plan targets
 <114> Report how much universal service (USF) support was received
 <115> How (USF) was used to improve service quality
 <116> How (USF) was used to improve service coverage
 <117> How (USF) was used to improve service capacity
 <118> Provide an explanation of network improvement targets not met in the prior calendar year.



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<910> Tribal Land(s) on which ETC Serves

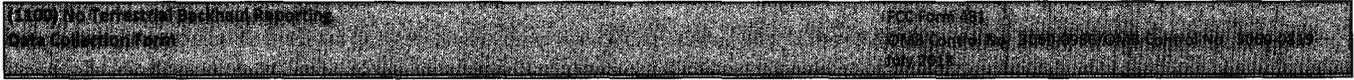
<920> Tribal Government Engagement Obligation

Name of Attached Document (.pdf)

If your company serves Tribal lands, please select (Yes, No, NA) for each of these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions;
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

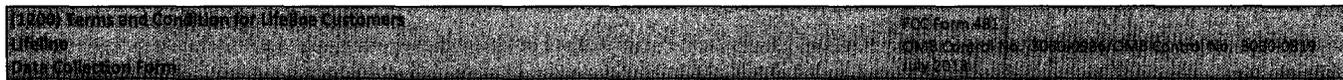
Select (Yes, No, NA)



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<1120> Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)

<1130> Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)



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<1210> Terms & Conditions of Voice Telephony Lifeline Plans

Name of attached document (.pdf)

<1220> Link to Public Website

HTTP [://northstate.net/lifeline](http://northstate.net/lifeline)

"Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

- <1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,
- <1222> Details on the number of minutes provided as part of the plan,
- <1223> Additional charges for toll calls, and rates for each such plan.



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CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

- <2010> 2nd Year Certification (47 CFR § 54.313(b)(1))
- <2011> 3rd Year Certification (47 CFR § 54.313(b)(2))

Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))

- <2012> 2013 Frozen Support Certification
- <2013> 2014 Frozen Support Certification
- <2014> 2015 Frozen Support Certification
- <2015> 2016 and future Frozen Support Certification

Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))

- <2016> Certification Support Used to Build Broadband

Connect America Phase II Reporting (47 CFR § 54.313(e))

- <2017> 3rd year Broadband Service Certification
- <2018> 5th year Broadband Service Certification
- <2019> Interim Progress Certification
- <2020> Please check the box to confirm that the attached PDF , on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.
- <2021> Interim Progress Community Anchor Institutions Name of Attached Document Listing Required Information _____



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CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

Progress Report on 5 Year Plan

<p>(3010) Milestone Certification (47 CFR § 54.313(f)(1)(i)) Please check this box to confirm that the attached PDF, on line 3012, contains the required information pursuant to § 54.313 (f)(1)(i), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.</p>	<p>Name of Attached Document Listing Required Information</p> <p>_____</p> <p><input type="checkbox"/></p>
<p>(3012) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii)) (3013) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) (3014) If yes, does your company file the RUS annual report (3015) Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires: Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)</p>	<p>Name of Attached Document Listing Required Information</p> <p>_____</p> <p><input type="checkbox"/> (Yes/No) <input type="checkbox"/> (Yes/No)</p> <p><input type="checkbox"/> <input type="checkbox"/></p>
<p>(3016) PDF of Balance Sheet, Income Statement and Statement of Cash Flows (3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation (3018) If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:</p>	<p>Name of Attached Document Listing Required Information</p> <p>_____</p> <p><input type="checkbox"/> (Yes/No)</p>
<p>(3019) Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications (3020) PDF of Balance Sheet, Income Statement and Statement of Cash Flows (3021) Management letter issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers.</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>
<p>(3022) Underlying information subjected to a review by an independent certified public accountant (3023) Underlying information subjected to an officer certification. (3024) PDF of Balance Sheet, Income Statement and Statement of Cash Flows (3025) Attach the worksheet listing required information</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>
<p>(3026) Attach the worksheet listing required information</p>	<p>Name of Attached Document Listing Required Information</p> <p>_____</p>

Certification - Reporting Carrier Data Collection Form	FCC Form 483 OMB Control No. 3050-0062/OMB Control No. 1050-0019 July 2012
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TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	N.ST. DBA N. ST.COMM
Signature of Authorized Officer:	CERTIFIED ONLINE Date
Printed name of Authorized Officer:	James D. McCarson
Title or position of Authorized Officer:	Vice President - Corporate Administration
Telephone number of Authorized Officer:	336-886-3628
Study Area Code of Reporting Carrier:	230491 Filing Due Date for this form: 10/15/2013
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Certification - Agent / Carrier Data Collection Form	FCC Form 497 OMB Control No. 3045-0082/OMB Control No. 3045-0082 July 2013
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent: _____	
Name of Reporting Carrier: N.ST. DBA N. ST.COMM	
Signature of Authorized Officer: CERTIFIED ONLINE	Date: _____
Printed name of Authorized Officer: _____	
Title or position of Authorized Officer: _____	
Telephone number of Authorized Officer: _____	
Study Area Code of Reporting Carrier: 230491	Filing Due Date for this form: 10/15/2013
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TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier: N.ST. DBA N. ST.COMM	
Name of Authorized Agent or Employee of Agent: _____	
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date: _____
Printed name of Authorized Agent or Employee of Agent: _____	
Title or position of Authorized Agent or Employee of Agent: _____	
Telephone number of Authorized Agent or Employee of Agent: _____	
Study Area Code of Reporting Carrier: 230491	Filing Due Date for this form: 10/15/2013
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Attachments

FCC Form 481 – Line 510

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

North State complies with applicable consumer protection standards. The company's Privacy Policy addresses the following consumer protection issues.

- North State obtains and uses individual customer information for business purposes only.
- North State informs customers how information North State obtains about them is used, as well as their options regarding its use.
- North State gives customers opportunities to control access by others to customer information and how North State uses individual information about them.
- North State enables customers to control how North State discloses individual information about them to other persons or entities, except as required by law or to protect the safety of customers, employees or property.

- North State strives to ensure that the information we obtain and use about customers is accurate.
- All North State employees are responsible for safeguarding individual customer communications and information.
- North State participates in and supports consumer, government and industry efforts to identify and resolve privacy issues.
- North State complies with all applicable privacy laws and regulations wherever North State does business.
- North State complies only with valid, properly issued, and legally enforceable third-party requests for access to customer information.

North State fully complies with Customer Proprietary Network Information (CPNI) regulations and has a detailed plan in place that describes how the company protects the confidentiality of CPNI. North State also complies with Do Not Call List and Truth in Billing regulations to further protect consumers.

FCC Form 481 – Line 610

47 CFR Section 54.313(a)(6) requires Eligible Telecommunications Carriers to certify the ability to function in emergency situations as set forth in Section 54.202 (a)(2). These rules require that an Eligible Telecommunications Carrier must:

“Demonstrate its ability to remain functional in emergency situations, including a demonstration that it has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations.”

North State Telephone Company dba North State Communications offers voice services to several communities in North Carolina and has designed its network to remain functional in emergency situations.

North State’s network is served by Central Offices, Remote Central Offices and access node/digital loop carrier (DLC) cabinets. All of our Central Offices are equipped with both battery and generator back-up facilities. Remote Central Offices are also equipped with both battery and generator back-up facilities. The majority of North State’s access nodes and DLCs are equipped with both battery and generator back-up facilities. In most cases our generators can provide at least 24 hours of backup power without refueling. Battery backup equipment has been installed in our facilities with the intent to provide 8 hours of backup power in emergency situations.

North State has designed its network with diverse fiber paths across major network links. Connections between Central and Remote Offices and to other providers have primary and backup links in place. North State utilizes path diversity in many connections across our network.

North State’s network has been designed with traffic spikes in mind. Major network links have been sized to handle greater than typical peak bandwidth requirements.

North State has complied with the emergency functionality requirements for this filing. This summary serves as certification for our adherence to 47 CFR 54.313(a)(6).