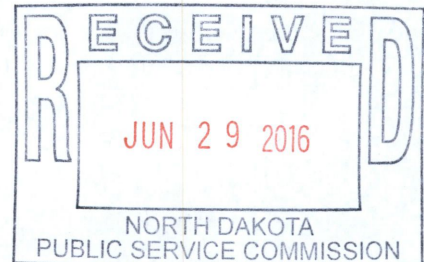


Via Federal Express and E-Filing

June 29, 2016

Mr. Darrell Nitschke
Director of Administration/Executive Secretary
North Dakota Public Service Commission
State Capitol
600 East Boulevard, Dept. 408
Bismarck, ND 58505-0480



Re: FCC Form 481 – High Cost and Low-Income Annual Report for Griggs County Telephone Company

Dear Mr. Nitschke:

This filing is being made to file the FCC Form 481 – High Cost and Low-Income Annual Report (FCC Form 481) for Griggs County Telephone Company. This filing is made pursuant to Sections 54.313 and 54.422 of the Federal Communications Commission (FCC) Rules.

Enclosed please find one copy of the Public FCC Form 481 which contains a copy of the “Redacted - For Public Inspection” copy of the Form for Griggs County Telephone Company that will be filed with the FCC and a Request to Protect Trade Secret Information on behalf of Griggs County Telephone Company. A copy of each of these documents has also been provided by email to ndpsc@nd.gov. In a separate sealed envelope, marked “Trade Secret - Private,” is Griggs County Telephone Company’s Trade Secret FCC Form 481 which contains the “Confidential Copy” of the Company’s 481 Form that has been filed with USAC and will be filed with the FCC.

We request the North Dakota Public Service Commission to file the annual certification regarding high-cost and low income support with USAC and the FCC, pursuant to 47 CFR54.314 (a).

Please contact the undersigned if you need further information.

Please contact me if further information is required.

Sincerely,

A handwritten signature in black ink that reads "Tom Campbell".

Tom Campbell
Telecommunications Consultant
TCampbell@otcpas.com
651-621-8511
Enclosures
CC: All Parties of Record

REDACTED - FOR PUBLIC INSPECTION

<010> Study Area Code	381615
<015> Study Area Name	GRIGGS COUNTY TEL CO
<020> Program Year	2017
<030> Contact Name: Person USAC should contact with questions about this data	Pamela Hintz
<035> Contact Telephone Number: Number of the person identified in data line <030>	6516218535 ext.
<039> Contact Email Address: Email of the person identified in data line <030>	phintz@otcpas.com
Form Type	54.313 and 54.422

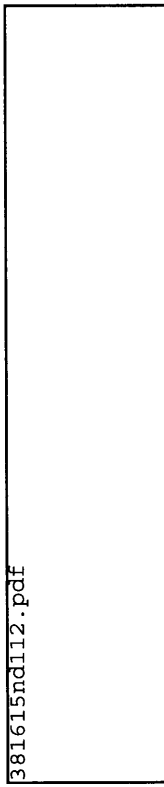
**(100) Service Quality Improvement Reporting
Data Collection Form**

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010> Study Area Code 381615
 <015> Study Area Name GRIGGS COUNTY TEL CO
 <020> Program Year 2017
 <030> Contact Name - Person USAC should contact regarding this data Pamela Hintz
 <035> Contact Telephone Number - Number of person identified in data line <030> 6516218535 ext.
 <039> Contact Email Address - Email Address of person identified in data line <030> phintz@otcpas.com

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

If your answer to Line <111> is yes, please 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

Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), 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.

Yes
Yes
Yes
Yes
Yes
Yes

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

(300) Unfulfilled Service Request
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010> Study Area Code 381615
 <015> Study Area Name GRIGGS COUNTY TEL CO
 <020> Program Year 2017
 <030> Contact Name - Person USAC should contact regarding this data Pamela Hintz
 <035> Contact Telephone Number - Number of person identified in data line <030> 6516218535 ext.
 <039> Contact Email Address - Email Address of person identified in data line <030> phintz@otcpas.com

<300> Unfulfilled service request (voice) 0

<310> Detail on attempts (voice) _____
Name of Attached Document

<320> Unfulfilled service request (broadband) 0

<330> Detail on attempts (broadband) _____
Name of Attached Document

REDACTED - FOR PUBLIC INSPECTION

(400) Number of Complaints per 1,000 customers
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	381615
<015>	Study Area Name	GRIGGS COUNTY TEL CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Pamela Hintz
<035>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	phintz@otcpas.com
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	Offered only fixed voice
<410>	Complaints per 1000 customers for fixed voice	0.0
<420>	Complaints per 1000 customers for mobile voice	
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	Offered only fixed broadband
<440>	Complaints per 1000 customers for fixed broadband	0.0
<450>	Complaints per 1000 customers for mobile broadband	

REDACTED - FOR PUBLIC INSPECTION

(500) Compliance With Service Quality Standards and Consumer Protection Rules

FCC Form 481

Data Collection Form

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	381615
<015>	Study Area Name	GRIGGS COUNTY TEL CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Pamela Hintz
<035>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	phintz@otcpae.com
<500>	Certify compliance with applicable service quality standards and consumer protection rules	Yes
<510>	Descriptive document for Service Quality Standards & Consumer Protection Rules Compliance	381615nd510.pdf

REDACTED - FOR PUBLIC INSPECTION

<010>	Study Area Code	381615
<015>	Study Area Name	GRIGGS COUNTY TEL CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Pamela Hintz
<035>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	phintz@otcpaa.com
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	381615nd610.pdf



<010> Study Area Code 381615
 <015> Study Area Name GRIGGS COUNTY TEL CO
 <020> Program Year 2017
 <030> Contact Name - Person USAC should contact regarding this data Pamela Hintz
 <035> Contact Telephone Number - Number of person identified in data line <030> 6516218535 ext.
 <039> Contact Email Address - Email Address of person identified in data line <030> phintz@otcpas.com

<900> Does the filing entity offer tribal land services? (Y/N) No

[Redacted box]

[Redacted box]

Name of Attached Document

Select Yes or No or Not Applicable
[Redacted]
[Redacted]
[Redacted]
[Redacted]
[Redacted]
[Redacted]
[Redacted]
[Redacted]
[Redacted]

If your company serves Tribal lands, please select (Yes, No, NA) for each of these boxes to confirm the status described on the attached document(s), 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.



<010> Study Area Code 381615
 <015> Study Area Name GRIGGS COUNTY TEL CO
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 <035> Contact Telephone Number - Number of person identified in data line <030> 6516218535 ext.
 <039> Contact Email Address - Email Address of person identified in data line <030> phintz@otcpas.com

<1000>	Voice services rate comparability certification	Yes	
<1010>	Attach detailed description for voice services rate comparability compliance		381615nd1010 .pdf <hr/> Name of Attached Document Yes - Pricing is no more than the most recent applicable benchmark announced by the Wireline Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance		381615nd1030 .pdf <hr/> Name of Attached Document



<010>	Study Area Code	381615
<015>	Study Area Name	GRIGGS COUNTY TEL CO
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<030>	Contact Name - Person USAC should contact regarding this data	Pamela Hintz
<035>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	phintz@otepas.com

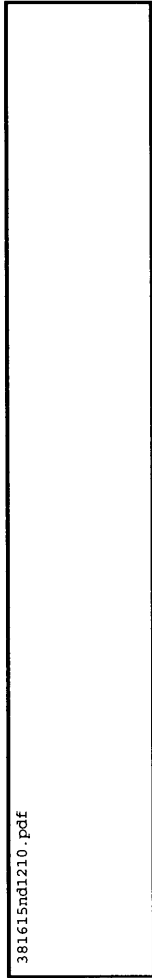
<1100> Certify whether terrestrial backhaul options exist (Y/N)

Yes

<1130> Please select the appropriate response (Yes, No, Not Applicable) 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).



<010> Study Area Code 381615
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 <030> Contact Name - Person USAC should contact regarding this data Pamela Hintz
 <035> Contact Telephone Number - Number of person identified in data line <030> 6516218535 ext.
 <039> Contact Email Address - Email Address of person identified in data line <030> phintz@otcpas.com



Name of Attached Document

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

<1220> Link to Public Website

HTTP

"Please check these boxes below to confirm that the attached document(s), 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.



<010> Study Area Code 381615
 <015> Study Area Name GRIGGS COUNTY TEL CO
 <020> Program Year 2017
 <030> Contact Name - Person USAC should contact regarding this data Pamela Hintz
 <035> Contact Telephone Number - Number of person identified in data line <030> 6516218535 ext.
 <039> Contact Email Address - Email Address of person identified in data line <030> ph.intz@otcpaa.com

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental 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)(i) - Note that for the July 1 2016 certification, this applies to Round 2 recipients of Incremental Support [Redacted]

<2011> 3rd Year Certification 47 CFR § 54.313(b)(1)(ii) - Note that for the July 1 2016 certification, this applies to Round 1 recipients of Incremental Support [Redacted]

<2022> Recipient certifies, representing year two after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only. [Redacted]

<2023> The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year two - 54.313(b)(2)(ii). Round 2 recipients only. [Redacted]

<2024A> Round 2 Recipient of Incremental Support? [Redacted]

<2024B> Attach list of census blocks indicating where funding was spent in year two - 54.313(b)(2)(ii). Round 2 recipients only. [Redacted]

<2025A> Round 1 or Round 2 Recipient of Incremental Support? [Redacted]

<2025B> Attach geocoded information for Phase I milestone reports (Round 1 for year three and Round 2 for year two) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13- [Redacted]

<2015> 2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4) [Redacted]

Name of Attached Document Listing Required Information [Redacted]

Name of Attached Document Listing Required Information [Redacted]



REDACTED - FOR PUBLIC INSPECTION

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)}

<2017A> Connect America Fund Phase II recipient?

<2017B> Attach information for Phase II - 54.313(e)(1) - list of geocoded locations already meeting the 54.309 public interest obligations at the end of calendar year 2015 and total amount of Phase II support, if any, the price

Name of Attached Document Listing Required Information

cap carrier used for capital expenditures in 2015.

<2018> Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(2)(ii)

Name of Attached Document Listing Required Information

<2019> Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(2)(v)

<2020> Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 40% of its supported locations in the state on December 31, 2017 - 54.313(e)(3)

<2021> Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 60% of its supported locations in the state on December 31, 2018 - 54.313(e)(4)

<2026> Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 80% of its supported locations in the state on December 31, 2019 - 54.313(e)(5)

<2027> Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 100% of its supported locations in the state on December 31, 2020 - 54.313(e)(6)

REDACTED - FOR PUBLIC INSPECTION

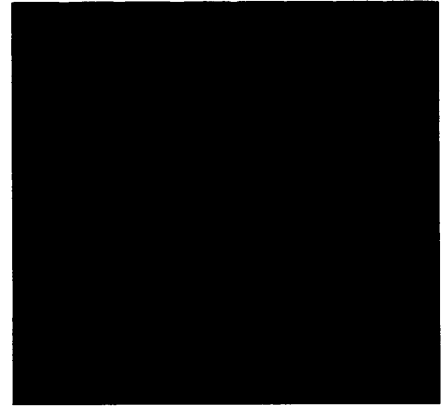
<010>	Study Area Code	381615
<015>	Study Area Name	GRIGGS COUNTY TEL CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Pamela Hintz
<035>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	phintz@otcpas.com

Complete the items below to note compliance with 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.

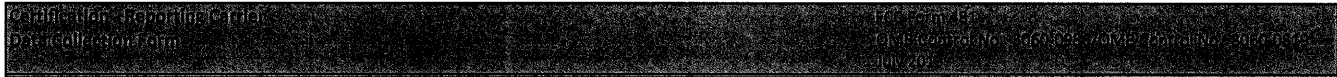
(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)		
(3010A)	Milestone Certification {47 CFR § 54.313(f)(1)(i)}	Yes - Attach Certification	
(3010B)	Please Provide Attachment	Name of Attached Document Listing Required Information	381615nd3010.pdf
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	No - No New Community Anchors	
(3012B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	<input checked="" type="radio"/> <input type="radio"/>
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	<input checked="" type="radio"/> <input type="radio"/>
	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:		
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		<input checked="" type="checkbox"/>
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		<input checked="" type="checkbox"/>
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information	381615nd3017.pdf
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No)	<input type="radio"/> <input type="radio"/>
	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:		
(3019)	Either a copy of their audited financial statement; or		<input type="checkbox"/>
(3020)	(2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows		<input type="checkbox"/>
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit.		<input type="checkbox"/>
	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:		
(3022)	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		<input type="checkbox"/>
(3023)	Underlying information subjected to a review by an independent certified public accountant		<input type="checkbox"/>
(3024)	Underlying information subjected to an officer certification.		<input type="checkbox"/>
(3025)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows		<input type="checkbox"/>
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	



<01D>	Study Area Code	381615
<01S>	Study Area Name	GRIGGS COUNTY TEL CO
<02D>	Program Year	2017
<03D>	Contact Name - Person USAC should contact regarding this data	Pamela Hintz
<03S>	Contact Telephone Number - Number of person identified in data line <03D>	6516218535 ext.
<039>	Contact Email Address - Email Address of person identified in data line <03D>	phintz@tcfpcas.com



- Financial Data Summary
- (3027) Revenue
- (3028) Operating Expenses
- (3029) Net Income
- (3030) Telephone Plant in Service(TPIS)
- (3031) Total Assets
- (3032) Total Debt
- (3033) Total Equity
- (3034) Dividends



<010>	Study Area Code	381615
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<030>	Contact Name - Person USAC should contact regarding this data	Pamela Hintz
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<039>	Contact Email Address - Email Address of person identified in data line <030>	phintz@otcpas.com

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:	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/29/2016
Printed name of Authorized Officer: Tyler Kilde	
Title or position of Authorized Officer: Vice President	
Telephone number of Authorized Officer: 7014373300 ext.	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
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 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	381615
<015> Study Area Name	GRIGGS COUNTY TEL CO
<020> Program Year	2017
<030> Contact Name - Person USAC should contact regarding this data	Pamela Hintz
<035> Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	phintz@otcpas.com

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) <u>Olsen Thielen</u> 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:	Olsen Thielen
Name of Reporting Carrier:	GRIGGS COUNTY TEL CO
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier: 381615	Filing Due Date for this form: 07/01/2016
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.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

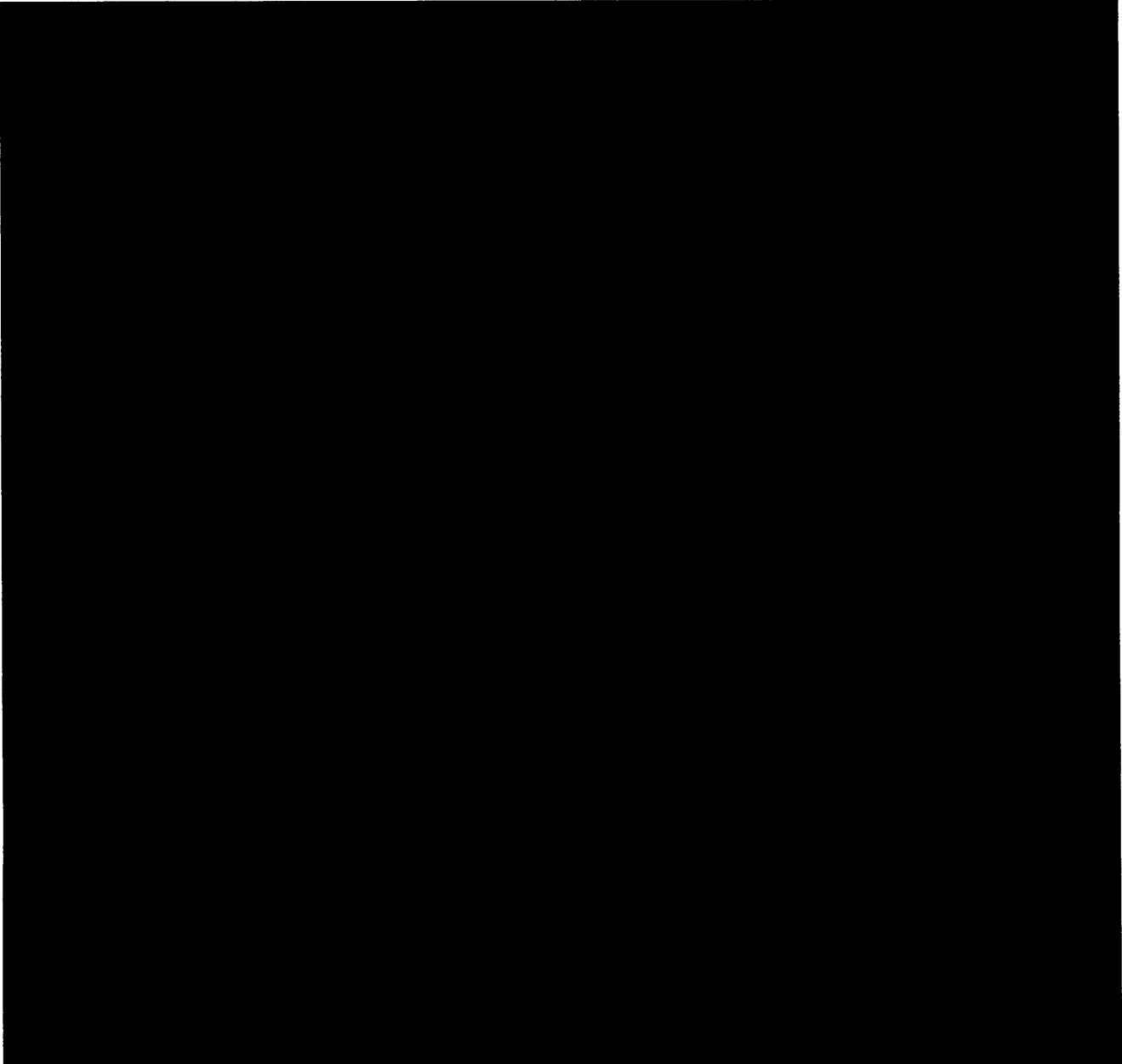
Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided 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:	GRIGGS COUNTY TEL CO
Name of Authorized Agent Firm:	Olsen Thielen
Signature of Authorized Agent or Employee of Agent:	Date: 06/28/2016
Name of Authorized Agent Employee:	Tom Campbell
Title or position of Authorized Agent or Employee of Agent:	Consultant
Telephone number of Authorized Agent or Employee of Agent:	6516218511 ext.
Study Area Code of Reporting Carrier: 381615	Filing Due Date for this form: 07/01/2016
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

REDACTED - FOR PUBLIC INSPECTION

**GRIGGS COUNTY TELEPHONE COMPANY (SAC 381615)
FCC FORM 481
PROGRESS REPORT ON SERVICE QUALITY IMPROVEMENT PLAN**

LINE 112 – FIVE YEAR PLAN OR PROGRESS REPORT



¹ Pursuant to Section 54.313(a) of the Commission's Rules "States that desire eligible telecommunications carriers to receive support pursuant to the high-cost program must file an annual certification with the Administrator and the Commission stating that all federal high-cost support provided to such carriers within that State was used in the preceding calendar year and will be used in the coming calendar year only for the provision, maintenance, and upgrading of facilities and services for which the support is intended."

LINE 114 thru 117 UNIVERSAL SERVICE



2 47 U.S.C. § 254(e)
3 47 C.F.R. § 54.314(b)
4 *See USF/ICC Transformation Order* at Para. 612.
5 *Id.*

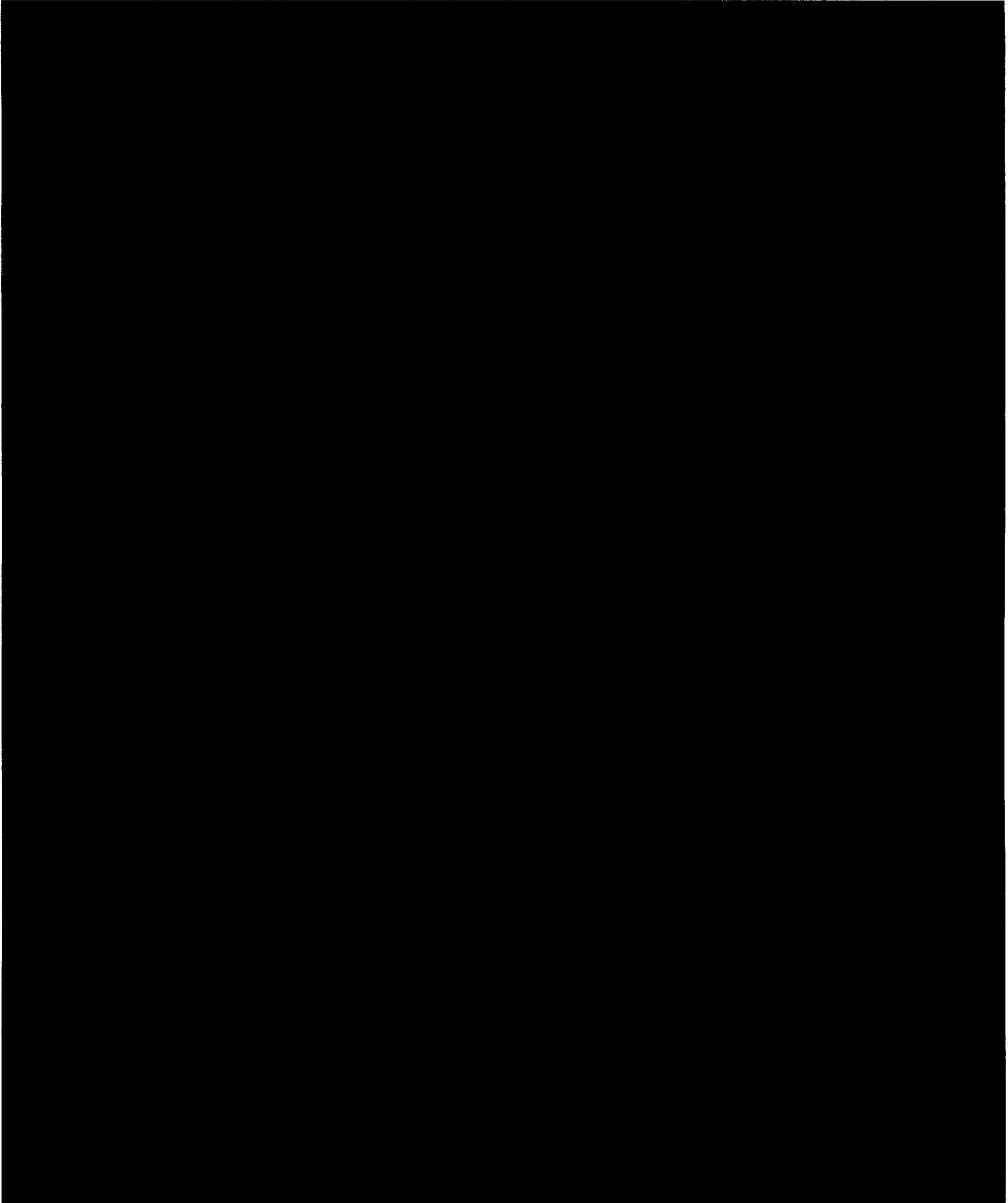
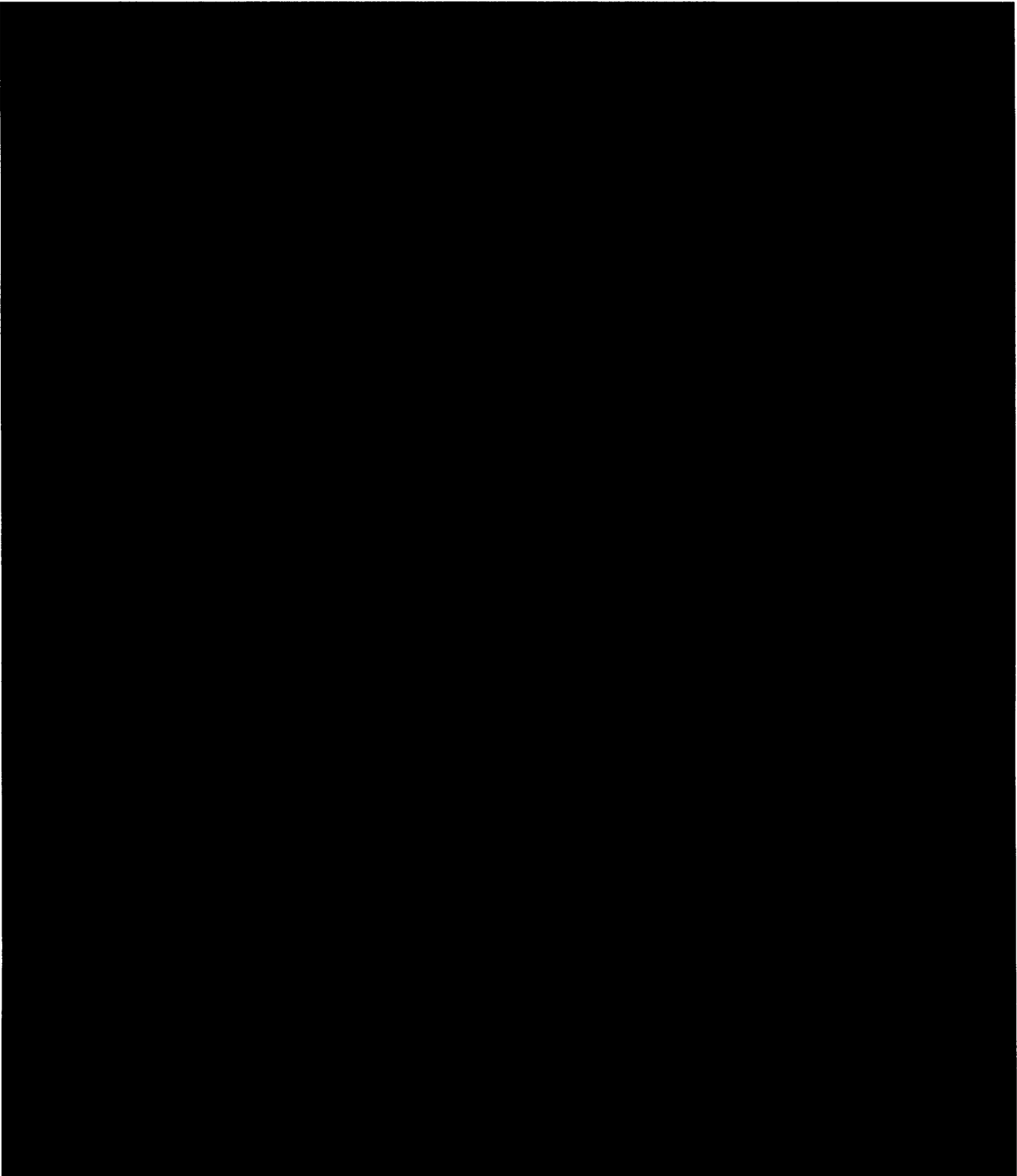


Table 3: Cooperstown Wire Center

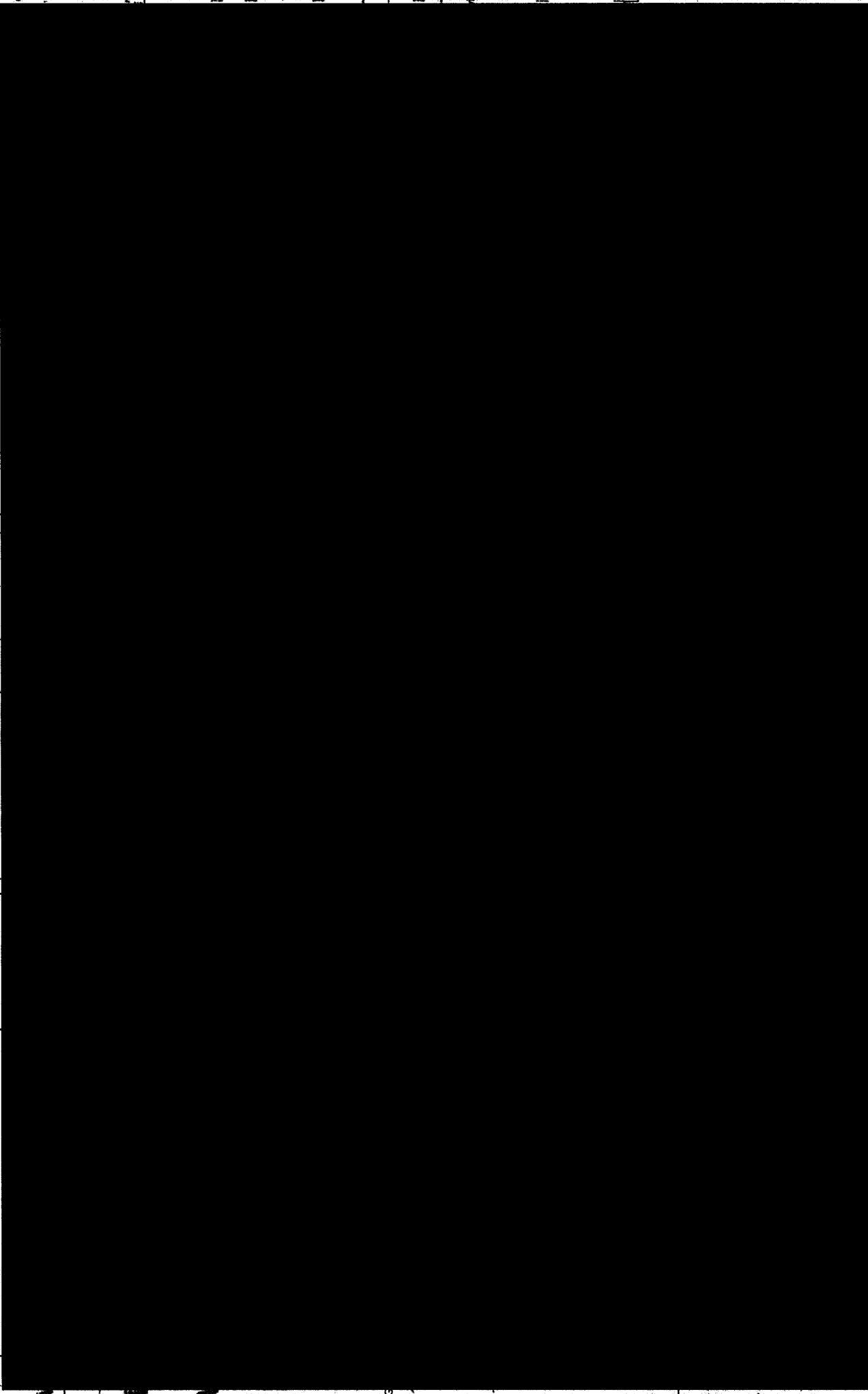


REDACTED - FOR PUBLIC INSPECTION

**GRIGGS COUNTY TELEPHONE COMPANY (SAC 381615)
FCC FORM 481
PROGRESS REPORT ON SERVICE QUALITY IMPROVEMENT PLAN
LINE 112 – FIVE YEAR PLAN OR PROGRESS REPORT**

ATTACHMENT A – NETWORK IMPROVEMENT MAP

Griggs County Tel Co - 381615



SAC: 381615

State: ND

Griggs County Tel

Form 481 Line No. 510 Compliance with Service Quality Standards and Consumer Protection

1. Griggs County Tel (Company) will provide service on a timely basis to requesting customers within the Company's designated service area where the Company's network already passes the potential customers premises, and

2. The Company will provide service, within a reasonable period of time, if the potential customer is within the Company's designated service area but outside the Company's existing network coverage, if the service can be provided at reasonable cost by:
 - a. Modifying or replacing the requesting customers equipment;
 - b. Deploying a roof-mounted antenna or other equipment;
 - c. Adjusting the nearest cell tower;
 - d. Adjusting network or customer facilities;
 - e. Reselling services from another carrier's facilities to provide service; or
 - f. Employing, leasing, or constructing an additional cell site, cell extender, repeater, or other similar equipment.

3. Service Quality Standards

The Company:

- Provides voice grade access to the public switched network.
- Provides flat rated local exchange service with no addition charge to end users.
- Provides access to the emergency services provided by local government or other public safety organization, such as 911 and enhanced 911.
- Provides toll blocking and toll limitation services.
- Advertises the availability of its services and the charges using media of general distribution and on its website.
- Maintains a business office providing customers with access to a customer service representative either in person or via a local telephone call or toll-free telephone number during normal business hours.
- Directs after hour calls to the Company's help desk.
- Directs trouble reports to the on-call technician.
- Tracks all service orders to ensure they are completed in a timely manner.
- Measures its service connection and service interruption performance on a regular basis.
- Trains employees to:
 - Answer all incoming calls promptly.
 - Respond to all inquiries for information promptly and courteously.
 - Investigate thoroughly all customer complaints.
 - Be knowledgeable about products and service offerings so they can assist the customer with selecting the best service option.
- Has a process for periodic inspection, testing and preventive maintenance of its equipment to permit the rendering of safe, adequate and continuous service at all times.

SAC: 381615

State: ND

Griggs County Tel

Form 481 Line No. 510 Compliance with Service Quality Standards and Consumer Protection

4. Consumer Protection Rules

The Company has established operating procedures designed to facilitate compliance with applicable consumer protection rules which include compliance with the Customer Proprietary Network Information (CPNI) rules. The operating procedures include:

- Appointment of a compliance officer.
- A manual detailing the specific procedures for protecting consumer information.
- Employee training on an annual basis.
- A disciplinary process for improper use of consumer information.

SAC: 381615

State: ND

Griggs County Tel

Form 481 Line No. 610 Description of Functionality in Emergency Situations

Griggs County Tel has:

- Established reasonable provisions to meet emergencies resulting from failures of lighting or power service, sudden and prolonged increases in traffic, or from fire, storm, or acts of God including provisions for emergency power that provide:
 - A minimum of four hours of battery service in each central office.
 - A permanently installed power unit in exchanges, or
 - Mobile power units that can be delivered on short notice and which can be readily connected in offices without installed emergency power facilities.

- Informed employees as to the procedures to be followed, including reasonable rerouting of traffic around damaged facilities and the deployment of emergency power, in the event of emergency in order to prevent or mitigate interruption or impairment of telecommunications service.

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Griggs County Tel

Form 481 Line No. 1010 Descriptive document for Voice Services Rate Comparability

Line 1010 – Description of Voice Services Rate Comparability: Provide a detailed description of how your pricing of fixed voice services is no more than two standard deviations above the applicable national average urban rate for voice service, as published annually by the Wireline Competition Bureau, as required in 47 C.F.R. § 54.313(a)(10).

On April 5, 2016 the Wireline Competition Bureau announced results of the Urban Rate Survey for Voice Services as part of FCC Public Notice DA 16-362. Referenced in this public notice are the results required to meet the rate comparability as noted:

“Based on the survey results, the reasonable comparability benchmark for voice services is \$41.07.³

³ Id. at 17694, para. 84.”

As required Griggs County Tel hereby certifies that its current fixed voice services for residential subscribers as defined in the USF/ICC Transformation Order is below \$41.07.

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Griggs County Tel

Form 481 Line No. 1030 Descriptive document for Broadband Service Rate Comparability

Line 1030 – Description of Broadband Service Rate Comparability: Provide a detailed description of how your pricing of a Broadband service meeting the Commission’s Public Interest Obligations is no more than the applicable benchmark, as published annually by the Wireline Competition Bureau, pursuant to 47 C.F.R. § 54.313(a)(12).

On April 5, 2016 the Wireline Competition Bureau announced the results of the Urban Rate Survey for Broadband Service as part of FCC Public Notice DA 16-362. Referenced in this public notice are the results required to meet the rate comparability as noted:

“Based on the survey results, the reasonable comparability benchmark calculations for broadband services can be calculated at <http://www.fcc.gov/encyclopedia/urban=rate-survey-data>.”

As required Griggs County Tel hereby certifies that it offers a Broadband service to residential subscribers at pricing that is no more than the applicable benchmark rate.

SAC: 381615
 State: ND
 Griggs County Tel
 Form 481 Line No. 1210 Lifeline Plans Terms and Conditions

Lifeline Terms and Conditions

1. Griggs County Tel (Company) offers lifeline program-supported service to qualified low-income residential consumers for one telephone line per eligible household. The lifeline program provides discounts to eligible low-income consumers to help them establish and maintain telephone service. Lifeline assistance lowers the cost of basic, monthly local telephone service. Eligible consumers can receive \$9.25 per month in discounts. In addition, the Federal Universal Service Charge is not assessed to consumers participating in Lifeline. Toll Blocking prevents the placement of all long distance calls for which a subscriber would be charged. Toll Blocking is available to eligible consumers at no cost. Also, by choosing the option, consumers are usually not charged a deposit.

Lifeline Program Eligibility Information

Program Based Eligibility

Consumers are eligible for Lifeline if they, one of their dependents or their household participate in one of the following qualifying assistance programs:

- Low Income Home Energy Assistance Program (LIHEAP)
- Federal Public Housing Assistance (Section 8)
- Supplemental Nutrition Assistance Program (SNAP)
- Medicaid
- National School Lunch Program (NSLP) and receives lunch through the program
- Supplemental Security Income (SSI)
- Temporary Assistance for Needy Families (TANF)

Lifeline applicant must present documentation demonstrating eligibility either through participation in one of the qualifying federal assistance programs or through income-based means.

Acceptable documentation of program-based eligibility includes: current or prior year's statement of benefits from a qualifying program; notice letter of participation in a qualifying program; program participation documents; or another official document evidencing the consumer's participation in a qualifying program.

Income Based Eligibility

In addition, consumers are eligible for Lifeline if their household income is at or below 135% of the federal poverty guidelines.

2016 Federal Poverty Guidelines – 135%

<u>Household Size</u>	<u>48 Contiguous States and D.C.</u>
1	\$ 16,038
2	21,627
3	27,216
4	32,805
5	38,394
6	43,983
7	49,586
8	55,202
For Each Additional Person, Add	5,616

Acceptable documentation of income eligibility includes: prior year's state, federal or Tribal tax return; current income statement from an employer or paycheck stub; social security statement of benefits; Veterans Administration statement of benefits; retirement/pension statement of benefits; unemployment/workmen's compensation statement of benefits; federal or Tribal notice of letter participating in General Assistance; or a divorce decree or child support award or other official document containing income information.

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 Form 481 Line No. 1210 Lifeline Plans Terms and Conditions

Lifeline Terms and Conditions (Continued)

Lifeline Program Eligibility Information (Continued)

Recertification of Lifeline Eligibility

Lifeline recipients are required to recertify their eligibility annually. Failure to properly recertify a recipient's continued eligibility for the Lifeline program will result in termination of the Lifeline recipient's monthly Lifeline discount and de-enrollment from the Lifeline Program.

Additional Lifeline Program Information

The Lifeline program is limited to one benefit per household, consisting of either wireline or wireless service. A household is defined, for purposes of the Lifeline Program, as an individual or group of individuals who live together at the same address and share income and expenses. Lifeline is government benefit program, and consumers who willfully make false statements in order to obtain the benefit can be punished by fine or imprisonment or can be barred from the program.

2. The Local services for (Company) that serve as its Lifeline Plans are in Compliance with the Essential telecommunications service as specified in North Dakota Chapter 49-21 4.c as follows:
 - C. Primary flat rate residence basic telephone service including the following service elements:
 - 1) Billing and collecting of the telecommunications company's charges for the service
 - 2) Primary directory listing
 - 3) Access to assistance
 - 4) Access to emergency 911 service and emergency operator assistance in the local exchange areas in which emergency 911 service is not available
 - 5) Except as provided in section 49-02-01.1, mandatory, flat-rate extended area service to designated nearby local exchange areas.
 - 6) Transmission service necessary for the connection between the end user's premises and the local exchange central office switch including a trunk connection that has inward dialing and necessary signaling service such as touchtone used by end users for service.

3. The Company's flat rate plans include unlimited local exchange calling including usage to designated nearby local exchange areas. The flat rate plans do not include any toll usage. The rates for any toll usage are determined by the rate plans of the Toll Provider(s) that are selected by lifeline end users.

4. The Company has met and will meet the requirements of eligible telecommunications carrier advertising. This includes:
 - a. A full description of available services in the Company's Official telephone directory, including the process to be used by customers to qualify for lifeline and link-up service.
 - b. Advertising of the available universal service in media of general circulation in the Company's designated service area. Availability may be advertised in newspapers, company newsletters, company or civic internet sites, bill stuffer, direct mailings, or other means intended to convey availability throughout the designated service area.

5. The specific Company terms and conditions for the Companies Lifeline Plans are set forth in pages included in Exhibit 1, attached.

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Exhibit 1

SAC: 381615

State: ND

Griggs County Tel

Form 481 Line No. 1210 Lifeline Plans Terms and Conditions

MLGC 4PACK BUNDLE

Combine these four popular services at one low rate at saves you more than \$85 each month. The MLGC 4Pack Bundle includes:

Residential Local Telephone including Voicemail with Email Notification, Caller ID, Call Waiting, Call Forwarding and 3-Way Calling

Long Distance Telephone (1,200 minutes)

20 Mbps Internet

E-Basic Cable TV

COMPARE AND SAVE

MLGC 4Pack Bundle Pricing**	\$114.99/month
Individual Retail Pricing	\$201.72/month
Savings of	\$86.73/month

*Some restrictions apply **Excluding taxes and FCC charges

TELEPHONE

MONTHLY TELEPHONE CHARGES

Local Residential Service	\$18.25
Local Business Service	\$24.25

CALLING FEATURE RATES

Caller ID	\$5.00
Caller ID with Call Waiting	\$8.00
Call Forwarding	\$2.10
Call Waiting	\$3.00
3-Way Calling	\$3.00
Inside Wire	\$1.00
Voice Mail with Email Notification	\$3.50

TELEPHONE INSTALL FEE

Installation Fee	\$25.00
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ND LONG DISTANCE RESIDENTIAL RATES

10c Nationwide Plus (\$3.95/month)	In-State	\$0.10/min
	State-to-State	\$0.10/min
	Canada	\$0.10/min
Flat Rate Plan	In-State	\$0.15/min
	State-to-State	\$0.10/min
	Canada	\$0.12/min

ND LONG DISTANCE BUSINESS RATES

10c Nationwide Plus (\$4.95/month)	In-State	\$0.10/min
	State-to-State	\$0.10/min
	Canada	\$0.10/min
Flat Rate Plan	In-State	\$0.14/min
	State-to-State	\$0.08/min
	Canada	\$0.12/min

Prices exclude taxes and FCC charges

INTERNET

RESIDENTIAL

	WITH PHONE	WITHOUT PHONE
5 Mbps/1 Mbps	\$35.99/month	\$65.99/month
10 Mbps/1.5 Mbps	\$55.99/month	\$85.99/month
20 Mbps/2 Mbps	\$93.99/month	\$123.99/month

BUSINESS

	WITH PHONE	WITHOUT PHONE
5 Mbps/1 Mbps	\$45.99/month	\$75.99/month
10 Mbps/1.5 Mbps	\$65.99/month	\$95.99/month
20 Mbps/2 Mbps	\$105.99/month	\$135.99/month

Installation Fee (Waived by signing a one year contract)

Prices exclude taxes and FCC charges

CABLE TV

MONTHLY CABLE TV RATES

E-Basic Cable TV (Channels 2-78)	\$47.93
Digital Tier** (Digital, Music and HD Channels)	\$19.95
HBO**	\$18.00
Showtime/TMC/Flix**	\$16.00
Cinemax**	\$10.00
Starz/Encore**	\$16.00
All 4 Premiums**	\$46.00
DVRHD Receiver Lease	\$9.00
HD Receiver Lease	\$5.00
Cable Card Lease	\$2.50
Installation Fee	\$40.00

**Video equipment is required to view programming

Prices exclude taxes and FCC charges

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Griggs County Tel

Response to Line 3010 – Milestone Certification (47 CFR §54.313(f)(1)(i))

Griggs County Tel hereby certifies that throughout 2015, it took reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 4 Mbps downstream/1 Mbps upstream, and currently, it is taking reasonable steps to provide upon reasonable request actual speeds of at least 10 Mbps downstream/1 Mbps upstream broadband service at with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas as determined in an annual survey, and that requests for such service are met within a reasonable amount of time.

SAC: 381615
State: ND
Griggs County Tel
Form 481 Line No. 3017 RUS Annual Report

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ATTACHMENT REDACTED IN ENTIRETY