

BINGHAM

Jean L. Kiddoo
 Brett P. Ferenchak
 jean.kiddoo@bingham.com
 brett.ferenchak@bingham.com

May 7, 2013

Via Overnight Courier and Email

Debra A. Howland, Executive Director & Secretary
 New Hampshire Public Utilities Commission
 21 South Fruit Street, Suite 10
 Concord, NH 03301
 Executive.director@puc.nh.gov



Re: TNCI Operating Company LLC CLEC and CTP Applications for Registration

Dear Ms. Howland:

On behalf of TNCI Operating Company LLC ("TNCI-OpCo"), please find enclosed an original and eight (8) copies of its CLEC and CTP Applications for Registration, which include the New Hampshire Secretary of State Certificate Authority and Contact Information (CTP Form 1, CLEC Form 1). This filing is also being provided via email.

It is TNCI-OpCo's understanding that rate schedules are no longer required as a result of Senate Bill 48. Therefore, TNCI-OpCo is not including a Rate Schedule Cover Sheet or Rate Schedules with its registration form.

In addition, these Applications are being filed in connection with a transaction whereby TNCI-OpCo will acquire certain of the assets, including customer accounts and contracts and telecommunications equipment, of Trans National Communications International Inc. (Debtor-In-Possession) ("TNCI-DIP"), through a sale pursuant to Section 363 of the United States Bankruptcy Code (the "Transaction") that was approved by the Bankruptcy Court on March 13, 2013.¹ TNCI-DIP is currently authorized to provide local exchange (including exchange access) and interexchange service in New Hampshire pursuant to Authorizations granted in Docket Nos. 04-099 and 01-008-00. TNCI-OpCo does not currently provide telecommunications services, but is seeking the same authorizations as currently held by TNCI-DIP so that TNCI-OpCo can continue to provide the same services as TNCI-DIP's customers currently receive from TNCI-DIP. Accordingly, TNCI-OpCo urges that the Commission expedite its consideration of this request to enable the Transaction to be completed as envisioned by the Bankruptcy Court Sale Order as soon as possible.

Beijing
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Bingham McCutchen LLP
 2020 K Street NW
 Washington, DC
 20006-1806

T +1.202.373.6000
 F +1.202.373.6001
 bingham.com

¹ TNCI-OpCo and TNCI-DIP are submitting a separate filing regarding TNCI-OpCo's acquisition of the customers and certain assets of TNCI-DIP.

Debra A. Howland, Executive Director & Secretary
May 7, 2013
Page 2

Please date-stamp the enclosed extra copy and return it in the envelope provided. Please do not hesitate to contact the undersigned if you have any questions.

Respectfully submitted,

A handwritten signature in blue ink that reads "Brett P Ferenchak". The signature is written in a cursive, slightly slanted style.

Jean L. Kiddoo
Brett P. Ferenchak

Counsel for TNCI Operating Company LLC

cc: Consumer Advocate

NHPUC FORMS CLEC-10 AND CLEC-1



CLEC APPLICATION FOR REGISTRATION

1. General Information

Federal Identification Number 90-0928958

Date of Application 5/6/13

Legal Name TNCI Operating Company LLC

Trade Name (d/b/a)
in New Hampshire _____

Contact Person Jeff Compton

Complete Mailing Address 114 E. Haley Street, Suite A
Santa Barbara, CA 93101

Phone Number 805-560-7809

Fax Number 805-869-1445

E-mail Address jcompton@bluecasa.com

2. History of Applicant

- a. Has the applicant, or have any of the general partners, corporate officers, director of the company, limited liability company managers or officers been convicted of any felony not annulled by a court? No
 - b. In the past ten years, has the applicant, or have any of the general partners, corporate officers, director of the company, limited liability company managers or officers had any civil, criminal or regulatory sanctions or penalties imposed pursuant to any state or federal consumer protection law or regulation? No
 - c. In the past ten years, has the applicant, or have any of the general partners, corporate officers, director of the company, limited liability company managers or officers settled any civil, criminal or regulatory investigation or complaint involving any state or federal consumer protection law or regulation? No
 - d. Is the applicant, or are any of the general partners, corporate officers, director of the company, limited liability company managers or officers currently the subject of any pending civil, criminal or regulatory investigation or complaint involving any state or federal consumer protection law or regulation? No
 - e. Has the applicant, or have any of the general partners, corporate officers, director of the company, limited liability company managers or officers been denied certification in any other state. No
- If so, please list each state. No

f. If the answer to any of the questions in a through e above is yes, please attach an explanation.

If you have any questions, please call the New Hampshire Public Utilities Commission at 603-271-2431.
 Please mail any documents to the above address.



3. Service

List the three primary telecommunications services the company will provide:

a. **Local Exchange**

b. **Interexchange**

c. **Private Line**

Identify the applicant's proposed service area:

State of New Hampshire

4. Required Attachments

- a. A copy of the New Hampshire Secretary of State Certificate of Authority
- b. Proof of Surety Bond, if applicable
- c. Form CLEC-1, Contact Information
- d. A copy of the CLEC's complete rate schedule
- e. A copy of Form CLEC -11, Adoption of Uniform Tariff, if applicable

5. Compliance Statements

I attest that the applicant will comply with all applicable New Hampshire laws and all Commission policies, rules and orders. JK (initial)[Puc 430.02]

I attest that the applicant has the necessary managerial qualifications, technical competence and financial resources to operate the CLEC for which the applicant seeks registration. JK (initial)

I attest that the applicant agrees to use with the Verizon New Hampshire rates for intraLATA switched access, as filed in Tariff 85, including future changes, or charge a lower rate. In the event the applicant believes a higher rate is justified, the applicant will file a separate petition with evidence supporting the higher rate. JK (initial)

6. Signature

I Jeff Compton, (name) declare under penalty of perjury that I am authorized to make this verification for and on behalf of the applicant; that I have read the information provided by the applicant in the foregoing document and any and all attachments, and am informed and believe the same are true, and on that ground, affirm that the matters stated herein are true.

JK Signed CEO/President Title

Subscribed and sworn before me this _____ (day) of _____ (month) in the year _____

County of _____

State of _____

See Attached Ca Jurat
Notary Public/Justice of the Peace
My Commission expires _____

JURAT

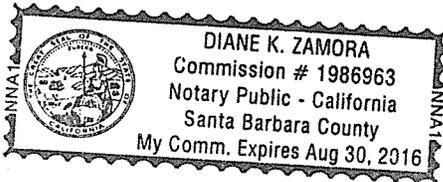
State of California

County of Santa Barbara

Subscribed and sworn to (or affirmed) before me on this 6 day of May, 2013
by Jeff Compton proved to me on the basis of satisfactory evidence to be
the person(s) who appeared before me.

(seal)

Signature Diane K. Zamora





State of New Hampshire
Department of State
Corporation Division

603-271-3246



Enclosed is the acknowledgment copy of your Application for Registration as a Foreign Limited Liability Company. It acknowledges this office's receipt and filing of your documents.

Should you have any questions, you may contact the Corporation Division at the above number or email us at corporate@sos.state.nh.us. Please reference your Business ID # located in the filed section of the enclosed acknowledgement copy of Application for Registration as a Foreign Limited Liability Company.

Please visit our website for helpful information regarding all your business needs.

Regards,

New Hampshire Department of State
Corporation Division

Business ID#: 688002

State of New Hampshire

Filed
Date Filed: 03/05/2013
Business ID: 688002
William M. Gardner
Secretary of State

Filing fee: \$ 50.00
Fee for Form SRA: \$ 50.00
Total fees: \$100.00
Use black print or type.

Form FLLC-1
RSA 304-C:12

APPLICATION FOR REGISTRATION AS A FOREIGN LIMITED LIABILITY COMPANY

PURSUANT TO THE PROVISIONS of the New Hampshire Limited Liability Company laws, the undersigned hereby applies for registration to transact business in New Hampshire and for that purpose submits the following statement:

FIRST: The name of the limited liability company is TNCI Operating Company LLC

SECOND: The name which it proposes to register and do business in New Hampshire is _____

THIRD: It is formed under the laws of Delaware

FOURTH: The date of its formation is January 9, 2013

FIFTH: The nature of the business or purposes to be conducted or promoted in New Hampshire is Telecommunications

SIXTH: The name of its registered agent in New Hampshire is Corporation Service Company d/b/a
Lawyers Incorporating Service

and the **street address**, town/city (including zip code and post office box, if any) of its registered office is
(agent's business address in New Hampshire) 14 Centre Street, Concord, New Hampshire 03301

SEVENTH: The sale or offer for sale of any ownership interests in this business will comply with the requirements of the New Hampshire Uniform Securities Act (RSA 421-B).

Page

State of New Hampshire
Form FLLC 1 - Application for Foreign Registration FLLC 3 Page(s)



T1306431050

APPLICATION FOR REGISTRATION AS A
FOREIGN LIMITED LIABILITY COMPANY

Form FLLC-1
(Cont.)

*Signature: 
Print or type name: Jeff Compton
Title: President & CEO + MANAGER
Date signed: February 22, 2013

Complete address of person signing: 114 E Haley St. Suite A
Santa Barbara, CA 93101

To receive your ANNUAL REPORT REMINDER NOTICE by email, please enter your email address here:
jcompton@bluecasa.com

* Shall be executed on behalf of the foreign limited liability company by a person with authority to do so under the laws of the state or other jurisdiction of its formation, or, if the foreign limited liability company is in the hands of a receiver, executor, or other court appointed fiduciary, trustee, or other fiduciary, it must be signed by that fiduciary.

DISCLAIMER: All documents filed with the Corporation Division become public records and will be available for public inspection in either tangible or electronic form.

Mail fees, DATED AND SIGNED ORIGINAL AND FORM SRA to: Corporation Division, Department of State, 107 North Main Street, Concord NH 03301-4989. Physical location: 25 Capitol Street, 3rd Floor, Concord, NH 03301.

**Form SRA – Addendum to Business Organization and Registration Forms
Statement of Compliance with New Hampshire Securities Laws**

Part I – Business Identification and Contact Information

Business Name: TNCI Operating Company LLC

Business Address (include city, state, zip): 114 E Haley St. Suite A, Santa Barbara, CA 93101

Telephone Number: (805) 560-7809 E-mail: jcompton@bluecasa.com

Contact Person: Jeff Compton

Contact Person Address (if different): _____

Part II – Check ONE of the following items in Part II. If more than one item is checked, the form will be rejected. [PLEASE NOTE: Most small businesses registering in New Hampshire qualify for the exemption in Part II, Item 1 below. **However**, you must insure that your business meets all of the requirements spelled out in A), B), and C)]:

- 1. Ownership interests in this business are exempt from the registration requirements of the state of New Hampshire because the business meets **ALL** of the following three requirements:
 - A) This business has **10 or fewer owners**; and
 - B) Advertising **relating to the sale of ownership interests** has not been circulated; and
 - C) Sales of ownership interests – if any – will be **completed within 60 days** of the formation of this business.
- 2. This business will offer securities in New Hampshire under another exemption from registration or will notice file for federal covered securities. Enter the citation for the exemption or notice filing claimed - _____
- 3. This business has registered or will register its securities for sale in New Hampshire. Enter the date the registration statement was or will be filed with the Bureau of Securities Regulation - _____
- 4. This business was formed in a state other than New Hampshire and will not offer or sell securities in New Hampshire.

Part III – Check ONE of the following items in Part III:

- 1. This business **is not being** formed in New Hampshire.
- 2. This business **is** being formed in New Hampshire and the registration document states that any sale or offer for sale of ownership interests in the business will comply with the requirements of the New Hampshire Uniform Securities Act.

Part IV – Certification of Accuracy

(NOTE: The information in Part IV must be certified by: 1) all of the incorporators of a corporation to be formed; or 2) an executive officer of an existing corporation; or 3) all of the general partners or intended general partners of a limited partnership; or 4) one or more authorized members or managers of a limited liability company; or 5) one or more authorized partners of a registered limited liability partnership or foreign registered limited liability partnership.)

I (We) certify that the information provided in this form is true and complete. (Original signatures **only**)

Name (print): Jeff Compton Signature: 

Date signed: February 22, 2013

Name (print): _____ Signature: _____

Date signed: _____

Name (print): _____ Signature: _____

Date signed: _____



CONTACT INFORMATION

A telecommunications carrier must complete this form: 1) When requesting authorization to provide telecommunications service in New Hampshire by the Public Utilities Commission, 2) Annually, on or before March 31 of each year, or 3) When there have been changes to the information previously reported.

Check here if you would prefer electronic notices rather than notice by US Mail Date 5/6/13

1. General Information

Federal Identification Number 90-0928958

CLEC Authorization Number N/A

Legal Name TNCI Operating Company LLC

Trade Name d/b/a
in New Hampshire _____

Complete Mailing Address 114 E. Haley Street, Suite A
Santa Barbara, CA 93101

Phone Number 805-560-7809

Fax Number 805-869-1445

E-mail Address _____

Website www.tncii.com

2. Person Responsible for Preparing the CLEC Annual Report

Name Jeff Compton

Title President & CEO

Complete Mailing Address 114 E. Haley Street, Suite A
Santa Barbara, CA 93101

Phone Number 805-560-7809

Fax Number 805-869-1445

E-mail Address jcompton@bluecasa.com



3. Person Responsible for Paying Assessment Bills

Name Jeff Compton

Title President & CEO

Complete Mailing Address 114 E. Haley Street, Suite A
Santa Barbara, CA 93101

Phone Number 805-560-7809

Fax Number 805-869-1445

E-mail Address jcompton@bluecasa.com

4. Regulatory Contact

Name Peter Helms

Title VP, Industry Relations

Complete Mailing Address 2 Charlesgate West
Boston, MA 02215

Phone Number 617-369-1131

Fax Number 617-369-1117

E-mail Address phelms@tncii.com

5. Person that Commission's Consumer Affairs Department Should Call Regarding Customer Complaints

Name Stefanie Edwards

Title Vice President, Operations

Complete Mailing Address 114 E. Haley Street, Suite A
Santa Barbara, CA 93101

Phone Number 805-560-8014

Fax Number 805-965-2476

E-mail Address sedwards@bluecasa.com



6. Director of Customer Service

Name Stefanie Edwards

Title Vice President, Operations

Complete Mailing Address 114 E. Haley Street, Suite A
Santa Barbara, CA 93101

Phone Number 805-560-8014

Fax Number 805-965-2476

E-mail Address sedwards@bluecasa.com

7. Company Officer Responsible for Customer Service

Name Stefanie Edwards

Title Vice President, Operations

Complete Mailing Address 114 E. Haley Street, Suite A
Santa Barbara, CA 93101

Phone Number 805-560-8014

Fax Number 805-965-2476

E-mail Address sedwards@bluecasa.com

8. End User Customer Service

Toll free 800 Number 1-800-800-8400

Fax Number 800-800-8874

E-mail Address customercare@tncii.com

Hours of Operation 24/7;standard M-F 8AM-8PM

9. End User Repair Service

Toll free 800 Number 1-800-800-8400

Fax Number 800-800-8874

E-mail Address customercare@tncii.com

Hours of Operation 24/7;standard M-F 8AM-8PM



10. Names and Titles of Principal Officers

Name	Title
Jeff Compton, President & CEO	
Julian Weldon, Secretary	

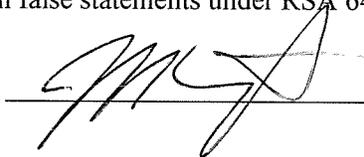
11. Contact Escalation List

Please attach a contact escalation list, including, name, phone number and e-mail address for first level contacts, directors and company officers responsible for the following: network, interconnection; and provisioning.

12. Signature

I certify that the information on this form is true and correct to the best of my knowledge and belief subject to the penalty for making unsworn false statements under RSA 641:3.

Authorized Representative
 Signature



Title President & CEO

Printed Name Jeff Compton

Date 5-6-13

11. Contact Escalation List

Network

Todd Eichler
Director, Network Operations
(619) 253-8434
todd.eichler@bluecasea.com

Interconnection

Peter Helms
Vice President, Industry Relations
(617) 369-1131
phelms@tncii.com

Provisioning

Jeffrey Cahill
Director, Provisioning
(617) 369-1099
jcahill@tncii.com

NHPUC FORMS CTP-10 AND CTP-1



CTP APPLICATION FOR REGISTRATION

1. General Information

Federal Identification Number 90-0928958

Date of Application 5/6/13

Legal Name TNCI Operating Company LLC

Trade Name (d/b/a)
 in New Hampshire _____

Contact Person Jeff Compton

Complete Mailing Address 114 E. Haley Street, Suite A
Santa Barbara, CA 93101

Phone Number 805-560-7809

Fax Number 805-869-1445

E-mail Address jcompton@bluecasa.com

2. History of Applicant

- a. Has the applicant, or have any of the general partners, corporate officers, director of the company, limited liability company managers or officers been convicted of any felony not annulled by a court? No
 - b. In the past ten years, has the applicant, or have any of the general partners, corporate officers, director of the company, limited liability company managers or officers had any civil, criminal or regulatory sanctions or penalties imposed pursuant to any state or federal consumer protection law or regulation? No
 - c. In the past ten years, has the applicant, or have any of the general partners, corporate officers, director of the company, limited liability company managers or officers settled any civil, criminal or regulatory investigation or complaint involving any state or federal consumer protection law or regulation? No
 - d. Is the applicant, or are any of the general partners, corporate officers, director of the company, limited liability company managers or officers currently the subject of any pending civil, criminal or regulatory investigation or complaint involving any state or federal consumer protection law or regulation? No
 - e. Has the applicant, or have any of the general partners, corporate officers, director of the company, limited liability company managers or officers been denied certification in any other state. No
- If so, please list each state. No

f. If the answer to any of the questions in a through e above is yes, please attach an explanation.

If you have any questions, please call the New Hampshire Public Utilities Commission at 603-271-2431.
 Please mail any documents to the above address.



3. Service

List the three primary telecommunications services the company will provide:

- a. Local Exchange
- b. Interexchange
- c. Private Line

Identify the applicant's proposed service area:

State of New Hampshire

4. Required Attachments

- a. A copy of the New Hampshire Secretary of State Certificate of Authority
- b. Form CTP-1, Contact Information
- c. A copy of the CTP's complete rate schedule
- d. A copy of Form CTP -11, Adoption of Model Tariff, if applicable

5. Compliance Statements

I attest that the applicant will comply with all applicable New Hampshire laws and all Commission policies, rules and orders. JK (initial)[Puc 450.02]

I attest that the applicant has the necessary managerial qualifications, technical competence and financial resources to operate the CTP for which the applicant seeks registration. JK (initial)

6. Signature

I Jeff Compton, (name) declare under penalty of perjury that I am authorized to make this verification for and on behalf of the applicant; that I have read the information provided by the applicant in the foregoing document and any and all attachments, and am informed and believe the same are true, and on that ground, affirm that the matters stated herein are true.

JK Signed CEO / President Title

Subscribed and sworn before me this _____ (day) of _____ (month) in the year _____

County of _____

State of _____

See Attached Ca Jurat
Notary Public/Justice of the Peace
My Commission expires _____

JURAT

State of California

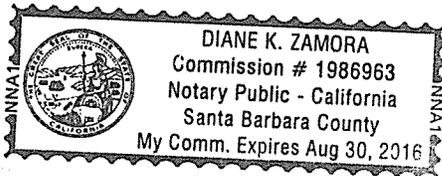
County of Santa Barbara

Subscribed and sworn to (or affirmed) before me on this 6 day of May, 2013
by Jeff Compton proved to me on the basis of satisfactory evidence to be
the person(s) who appeared before me.

(seal)

Signature

Diane K. Zamora





State of New Hampshire

Department of State

Corporation Division

603-271-3246



Enclosed is the acknowledgment copy of your Application for Registration as a Foreign Limited Liability Company. It acknowledges this office's receipt and filing of your documents.

Should you have any questions, you may contact the Corporation Division at the above number or email us at corporate@sos.state.nh.us. Please reference your Business ID # located in the filed section of the enclosed acknowledgement copy of Application for Registration as a Foreign Limited Liability Company.

Please visit our website for helpful information regarding all your business needs.

Regards,

New Hampshire Department of State
Corporation Division

Business ID#: 688002

State of New Hampshire

Filed
Date Filed: 03/05/2013
Business ID: 688002
William M. Gardner
Secretary of State

Filing fee: \$ 50.00
Fee for Form SRA: \$ 50.00
Total fees: \$100.00
Use black print or type.

Form FLLC-1
RSA 304-C:12

APPLICATION FOR REGISTRATION AS A FOREIGN LIMITED LIABILITY COMPANY

PURSUANT TO THE PROVISIONS of the New Hampshire Limited Liability Company laws, the undersigned hereby applies for registration to transact business in New Hampshire and for that purpose submits the following statement:

FIRST: The name of the limited liability company is TNCI Operating Company LLC

SECOND: The name which it proposes to register and do business in New Hampshire is _____

THIRD: It is formed under the laws of Delaware

FOURTH: The date of its formation is January 9, 2013

FIFTH: The nature of the business or purposes to be conducted or promoted in New Hampshire is Telecommunications

SIXTH: The name of its registered agent **in New Hampshire** is Corporation Service Company d/b/a Lawyers Incorporating Service
and the **street address**, town/city (including zip code and post office box, if any) of its registered office is (agent's business address **in New Hampshire**) 14 Centre Street, Concord, New Hampshire 03301

SEVENTH: The sale or offer for sale of any ownership interests in this business will comply with the requirements of the New Hampshire Uniform Securities Act (RSA 421-B).

Page

State of New Hampshire
Form FLLC 1 - Application for Foreign Registration FLLC 3 Page(s)



T1306431050

APPLICATION FOR REGISTRATION AS A
FOREIGN LIMITED LIABILITY COMPANY

Form FLLC-1
(Cont.)

*Signature: 
Print or type name: Jeff Compton
Title: President & CEO + MANAGER
Date signed: February 22, 2013

Complete address of person signing: 114 E Haley St. Suite A
Santa Barbara, CA 93101

To receive your ANNUAL REPORT REMINDER NOTICE by email, please enter your email address here:
jcompton@bluecasa.com

* Shall be executed on behalf of the foreign limited liability company by a person with authority to do so under the laws of the state or other jurisdiction of its formation, or, if the foreign limited liability company is in the hands of a receiver, executor, or other court appointed fiduciary, trustee, or other fiduciary, it must be signed by that fiduciary.

DISCLAIMER: All documents filed with the Corporation Division become public records and will be available for public inspection in either tangible or electronic form.

Mail fees, DATED AND SIGNED ORIGINAL AND FORM SRA to: Corporation Division, Department of State, 107 North Main Street, Concord NH 03301-4989. Physical location: 25 Capitol Street, 3rd Floor, Concord, NH 03301.

**Form SRA – Addendum to Business Organization and Registration Forms
Statement of Compliance with New Hampshire Securities Laws**

Part I – Business Identification and Contact Information

Business Name: TNCI Operating Company LLC
Business Address (include city, state, zip): 114 E Haley St. Suite A, Santa Barbara, CA 93101
Telephone Number: (805) 560-7809 E-mail: jcompton@bluecasa.com
Contact Person: Jeff Compton
Contact Person Address (if different): _____

Part II – Check ONE of the following items in Part II. If more than one item is checked, the form will be rejected. [**PLEASE NOTE:** Most small businesses registering in New Hampshire qualify for the exemption in Part II, Item 1 below. **However**, you must insure that your business meets all of the requirements spelled out in A), B), and C)];

1. Ownership interests in this business are exempt from the registration requirements of the state of New Hampshire because the business meets ALL of the following three requirements:
A) This business has **10 or fewer owners**; and
B) Advertising **relating to the sale of ownership interests** has not been circulated; and
C) Sales of ownership interests – if any – will be **completed within 60 days** of the formation of this business.
2. This business will offer securities in New Hampshire under another exemption from registration or will notice file for federal covered securities. Enter the citation for the exemption or notice filing claimed - _____.
3. This business has registered or will register its securities for sale in New Hampshire. Enter the date the registration statement was or will be filed with the Bureau of Securities Regulation - _____.
4. This business was formed in a state other than New Hampshire and will not offer or sell securities in New Hampshire.

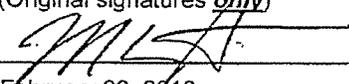
Part III – Check ONE of the following items in Part III:

1. This business **is not being** formed in New Hampshire.
2. This business **is** being formed in New Hampshire and the registration document states that any sale or offer for sale of ownership interests in the business will comply with the requirements of the New Hampshire Uniform Securities Act.

Part IV – Certification of Accuracy

(NOTE: The information in Part IV must be certified by: 1) all of the incorporators of a corporation to be formed; or 2) an executive officer of an existing corporation; or 3) all of the general partners or intended general partners of a limited partnership; or 4) one or more authorized members or managers of a limited liability company; or 5) one or more authorized partners of a registered limited liability partnership or foreign registered limited liability partnership.)

I (We) certify that the information provided in this form is true and complete. (Original signatures only)

Name (print):	<u>Jeff Compton</u>	Signature:	<u></u>
		Date signed:	<u>February 22, 2013</u>
Name (print):	_____	Signature:	_____
		Date signed:	_____
Name (print):	_____	Signature:	_____
		Date signed:	_____



CONTACT INFORMATION

A telecommunications carrier must complete this form: 1) When requesting authorization to provide telecommunications service in New Hampshire by the Public Utilities Commission, 2) Annually, on or before March 31 of each year, or 3) When there have been changes to the information previously reported.

Check here if you would prefer electronic notices rather than notice by US Mail Date 5/6/13

1. General Information

Federal Identification Number 90-0928958

CTP Authorization Number N/A

Legal Name TNCI Operating Company LLC
Trade Name d/b/a
in New Hampshire _____

Complete Mailing Address 114 E. Haley Street, Suite A
Santa Barbara, CA 93101

Phone Number 805-560-7809

Fax Number 805-869-1445

E-mail Address _____

Website www.tncii.com

2. Person Responsible for Preparing the CTP Annual Report

Name Jeff Compton

Title President & CEO

Complete Mailing Address 114 E. Haley Street, Suite A
Santa Barbara, CA 93101

Phone Number 805-560-7809

Fax Number 805-869-1445

E-Mail Address jcompton@bluecasa.com



3. Person Responsible for Paying Assessment Bills

Name Jeff Compton

Title President & CEO

Complete Mailing Address 114 E. Haley Street, Suite A
Santa Barbara, CA 93101

Phone Number 805-560-7809

Fax Number 805-869-1445

E-Mail Address jcompton@bluecasa.com

4. Regulatory Contact

Name Peter Helms

Title VP, Industry Relations

Complete Mailing Address 2 Charlesgate West
Boston, MA 02215

Phone Number 617-369-1131

Fax Number 617-369-1117

E-Mail Address phelms@tncii.com

5. Person that Commission's Consumer Affairs Department Should Call Regarding Customer Complaints

Name Stefanie Edwards

Title Vice President, Operations

Complete Mailing Address 114 E. Haley Street, Suite A
Santa Barbara, CA 93101

Phone Number 805-560-8014

Fax Number 805-965-2476

E-Mail Address sedwards@bluecasa.com



6. Director of Customer Service

Name Stefanie Edwards

Title Vice President, Operations

Complete Mailing Address 114 E. Haley Street, Suite A
Santa Barbara, CA 93101

Phone Number 805-560-8014

Fax Number 805-965-2476

E-Mail Address sedwards@bluecasa.com

7. Company Officer Responsible for Customer Service

Name Stefanie Edwards

Title Vice President, Operations

Complete Mailing Address 114 E. Haley Street, Suite A
Santa Barbara, CA 93101

Phone Number 805-560-8014

Fax Number 805-965-2476

E-Mail Address sedwards@bluecasa.com

8. End User Customer Service

Toll free 800 Number 1-800-800-8400

Fax Number 800-800-8874

E-Mail Address customercare@tncii.com

Hours of Operation 24/7;standard M-F 8AM-8PM

9. End User Repair Service

Toll free 800 Number 1-800-800-8400

Fax Number 800-800-8874

E-Mail Address customercare@tncii.com

Hours of Operation 24/7;standard M-F 8AM-8PM



10. Names and Titles of Principal Officers

Name	Title
Jeff Compton, President & CEO	
Julian Weldon, Secretary	

11. Signature

I certify that the information on this form is true and correct to the best of my knowledge and belief subject to the penalty for making unsworn false statements under RSA 641:3.

Authorized Representative
 Signature  Title President & CEO

Printed Name Jeff Compton Date 5-6-13

If you have any questions, please call the New Hampshire Public Utilities Commission at 603-271-2431.
 Please mail any documents to the above address.