

If this application is not filed on time, or if unable to do so, file one original verified application with the Chief Clerk.)

Docket No. \_\_\_\_\_

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CHIEF CLERK'S OFFICE  
2009 MAY 14 A 10:51  
ILLINOIS COMMERCE COMMISSION

Please provide the appropriate information in the ( ) areas in the heading below.

NovaTel Ltd., Inc. :  
:  
Application for a Certificate of :  
Interexchange Authority to operate :  
as a reseller of telecommunications :  
services in the State of Illinois :

09-0240

**APPLICATION FOR CERTIFICATE TO BECOME A  
TELECOMMUNICATIONS CARRIER**

(Use additional sheets as necessary.)

**GENERAL**

- 1. Applicant's Name (including d/b/a, if any) NovaTel Ltd., Inc.
- 2. FEIN # 74-2969809  
Address: Street 11550 IH-10 West, Suite 110  
San Antonio, TX 78230
- 3. Authority Requested: (Mark all that apply) \_\_\_\_\_ 13-403 Facilities Based Interexchange  
\_\_\_\_\_ X 13-404 Resale of Interexchange  
\_\_\_\_\_ 13-405 Facilities Based Local

3. Request for waivers/variances: In applications for local exchange service authority under Sections 13-404 or 13-405, waivers of Part 710 and of Section 735.180 of Part 735 are generally requested. In applications for interexchange service authority under Sections 13-403 and 13-404, waivers of Part 710 and Part 735 are generally requested. Please indicate which waivers Applicant is requesting and explain why Applicant is requesting each waiver/variance.

X Part 710 Uniform System of Accounts for Telecommunications Carriers  
**Applicant, as a reseller will utilize GAAP accounting practices**

\_\_\_\_\_ Part 735 Procedures Governing the Establishment of Credit, Billing,

Deposits, Termination of Service and Issuance of Telephone Directories for Local Exchange Telecommunications Carriers in the State of Illinois

\_\_\_\_\_ Section 735.180 Directories

\_\_\_\_\_ Other

4. For all applicants requesting local exchange authority under Section 13-404 or Section 13-405, please complete the following: **NOT APPLICABLE**
- (a) the Standard Questions for Applicants Seeking Local Exchange Service Authority found in Appendix A of this document
  - (b) the 9-1-1 Questions for Applicants Seeking Local Exchange Service Authority found in Appendix B of this document;
  - (c) the Financial Questions for Applicants Seeking Local Exchange Service Authority found in Appendix C of this document; and
  - (d) if applicable, the Prepaid Service Questions for Applicants Seeking Local Exchange Service Authority found in Appendix D of this document.

5. In what area of the state does the Applicant propose to provide service?

Applicant proposes to offer Interexchange services statewide.

6. Please attach a sheet designating contact persons to work with Staff on the following:
- a) issues related to processing this application
  - b) consumer issues
  - c) customer complaint resolution
  - d) technical and service quality issues **See EXHIBIT A**
  - e) "tariff" and pricing issues
  - f) 9-1-1 issues
  - g) security/law enforcement

Please identify each contact person's (i) name, (ii) title, (iii) mailing address, (iv) telephone number, (v) facsimile number, and (vi) e-mail address.

7. Please check type of organization?

\_\_\_\_\_ Individual                        X   Corporation  
\_\_\_\_\_ Partnership                      Date corporation was formed   12/28/2007    
\_\_\_\_\_ Other (Specify)                      In what state?   Texas  

8. Submit a copy of articles of incorporation and a copy of certificate of authority to transact business in Illinois.

**See EXHIBIT B**

9. List jurisdictions in which Applicant is offering service(s).

California, the District of Columbia, Florida, Indiana, Kentucky, New Jersey, New York, Pennsylvania, Texas and Utah.

10. Has the Applicant, or any principal in Applicant, been denied a Certificate of Service or had its certification revoked or suspended in any jurisdiction in this or another name?

\_\_\_\_\_ YES (Please provide details)       X   NO

11. Have there been any complaints or judgments levied against the Applicant in any other jurisdiction?

\_\_\_\_\_ YES       X   NO

If YES, describe fully. \_\_\_\_\_

12. Has Applicant provided service under any other name?

  X   YES     \_\_\_\_\_ NO

If YES, please list: Applicant was known as NovaTel Ltd. a Limited Partnership formed in Texas on October 5<sup>th</sup>, 2000. Current Applicant Incorporated on December 28, 2007. There were no fundamental changes in operations or personnel.

13. Will the Applicant keep its books and records in Illinois? \_\_\_\_\_ YES       X   NO

If NO, permission pursuant to 83 Ill. Adm Code Part 250 needs to be requested.

Waiver Request 83 Ill. Adm. Code Part 250 – Applicant hereby requests waiver of Title 83 of the Illinois Administrative Code Part 250, with respect to maintaining its records, books and corporate reports in the State of Illinois. The Applicant does not intend to open or keep an office in the State of Illinois, nor will there be employees or agents of the Applicant located in the State of Illinois with corporate records, although there may be need for technical personnel on a short term and temporary basis. The Applicant requests to keep its corporate records at its' principal place of business at 11550 IH-10 West, Suite 110, San Antonio, TX 78230

## MANAGERIAL

14. Please attach evidence of the applicant's managerial and technical resources and ability to provide service. This may be in either narrative form, resumes of key personnel, or a combination of these forms. **See EXHIBIT C**

15. List officers of Applicant.

Paul A. Golibart, President

Michael V. Parker, VP & COO

James Quail, VP of Network Provisioning

Alan Saltzman, CFO

Mark G. Sessions, General Counsel

Diana P. Golibart, Controller

Ari Gorman, Chief Technology Ofcer

Carl M. Golibart, Director of MIS

16. Does any officer of Applicant have an ownership or other interest in any other entity which has provided or is currently providing telecommunications services?  YES  NO

If YES, list entity. \_\_\_\_\_

17. How will Applicant bill for its service(s)? (At a minimum, describe how often the Applicant will bill for service and details of the billing statement.)

Applicant direct bills customers for all services. Services are listed as separate line items on the customer invoice. Required taxes, surcharges and fees, if applicable are also listed as separate line items.

18. How does Applicant propose to handle service, billing, and repair complaints? (At a minimum, describe Applicant's internal process for complaint resolution, the complaint escalation process, the timeframe and process by which the customer is notified by Applicant that they may seek assistance from the Commission?)

**See EXHIBIT D**

19. Will personnel be available at Applicant's business office during regular working hours to respond to inquiries about service or billing?  YES  NO

20. What telephone number(s) would a customer use to contact your company? Customers may reach the company by a Toll Free Number 1-888-765-6682, or by telephone: (210) 271-3407, Fax (210) 349-7562, or by email support at; [noc@novatelnetworks.com](mailto:noc@novatelnetworks.com)

21. Will Applicant abide by all Federal and State slamming and cramming laws pursuant to Section 13-902 of the Public Utilities Act and Section 258 of the 1996 Telecommunications Act?

YES  NO

22. Please describe applicant's procedures to prevent slamming and cramming of customers?

Applicant requires that customers desiring to purchase services from the Company, complete an Application for service and must sign an agreement.

The Applicant has not ever had a slamming incident, nor has it ever been the subject of a slamming or cramming complaint.

23. If granted authority to operate as a local exchange carrier, will the applicant abide by the following 83 Illinois Administrative Code Parts: 705, 710, 720, 725, 730, 732, 735, 755, 756, 757, 770, and 772?

YES  NO (If no, please provide an explanation.) IXC Reseller

24. Is Applicant aware that it must file tariffs prior to providing service in Illinois?

YES  NO

**SEE ATTACHED EXHIBIT "E" PROPOSED TARIFF**

## **FINANCIAL**

25. Please attach evidence of Applicant's financial fitness through the submission of its most current income statement and balance sheet, or other appropriate documentation of applicant's financial resources and ability to provide service.

**See EXHIBIT F**

**TECHNICAL**

26. Does Applicant utilize its own equipment and/or facilities? \_\_\_\_\_ YES  X  NO

If YES, please list the facilities Applicant intends to utilize. Also include evidence that Applicant possesses the necessary technical resources to deploy and maintain said facilities:

\_\_\_\_\_  
\_\_\_\_\_

If NO, which facility provider(s)'s services does the Applicant intend to use?

AT&T Communications of Illinois, Inc.

27. Please describe the nature of service to be provided (e.g., operator services, internet, debit cards, long distance service, data services, local service, prepaid local service).

NovaTel Ltd., Inc. proposes to offer resold intrastate interexchange services.

28. Will technical personnel be available at all times to assist customers with service problems?

X  YES \_\_\_\_\_ NO

29. If Applicant intends to provide payphone service, will the equipment utilized comply with FCC requirements and Finding (9) of the Commission Order entered in Docket No. 84-0442 on June 11, 1986, including, but not limited to: (a) touch dialing; (b) access to 9-1-1 and "0" operator dialing without use of a coin; (c) rules governing use of payphones by disabled persons; (d) ability to complete local and long-distance calls; (e) unlimited duration for local calls; and (f) a message explaining the telephone's general operations, dialing instructions for emergency assistance, payphone owner's name, method of reporting service problems and method of receiving credit for faulty calls? \_\_\_\_\_ YES \_\_\_\_\_ NA \_\_\_\_\_ NO

  
\_\_\_\_\_

(Signature of Applicant)

**VERIFICATION**

This application shall be verified under oath.

**OATH**

State of TEXAS

ss

County of BEXAR

Paul Golibart, makes his oath and says that he is President of NovaTel Ltd., Inc.;

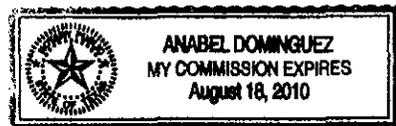
that he has examined the foregoing application and that to the best of his knowledge, information, and belief, all statements of fact contained in the said application are true;

and the said application is a correct statement of the business and affairs of NovaTel Ltd., Inc., applicant, in respect to each and every matter set forth therein.

Paul G. Golibart  
(Signature of affiant)

Subscribed and sworn to before me, a Notary Public/

Executive Assistant  
(Title of person authorized to administer oaths)



in the State and County above named, this 23<sup>rd</sup> day of March, 2009.

Anabel Dominguez  
(Signature of person authorized to administer oath)

## **LIST OF EXHIBITS**

<b>EXHIBIT A</b>	Designated Contact Persons
<b>EXHIBIT B</b>	Texas Certificate of Fact Illinois Secretary of State Certification
<b>EXHIBIT C</b>	Managerial and Technical Abilities
<b>EXHIBIT D</b>	Complaint Resolution Statement
<b>EXHIBIT E</b>	Proposed Interexchange Tariff
<b>EXHIBIT F</b>	Financial Statements <b>FILED AS CONFIDENTIAL</b>