

**OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION**

ORIGINAL

Docket No. _____
ICC Office Use Only

Midwestern Telecommunications Inc. :
:
Application for a certificate of :
authority to operate as a wireless :
reseller of telecommunication services :
throughout the State of Illinois :

10-0229

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ILLINOIS
COMMERCE COMMISSION

**APPLICATION FOR CERTIFICATE TO BECOME A
TELECOMMUNICATIONS CARRIER**
(Use additional sheets as necessary.)

GENERAL

1. Applicant's Name(including d/b/a, if any)

FEIN # 36-4182770

Midwestern Telecommunications Inc

Address: Street 65 E 16th St

City Chicago Heights State/Zip IL. 60411

2. Authority Requested: (Mark all that apply) _____ 13-403 Facilities Based Interexchange
_____ 13-404 Resale of Local and/or Interexchange
__X__ 13-401 Wireless Resale

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

_____ 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:

YES NO

If YES, please list. _____

13. Will the Applicant keep its books and records in Illinois? YES NO
If NO, permission pursuant to 83 Ill. Adm Code Part 250 needs to be requested.

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.

Please see attached Exhibit C

15. List officers of Applicant.

Jerry Holt, President Ikechuku Chinwah, Secretary

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.)

Customers will not receive a bill, wireless service will be provided on a pre-pay basis only. Customers will purchase cards to add minutes to their cell phones. Customers will also receive a predetermined amount of free minutes each month.

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?)

MTI will handle all customer service issues from its corporate offices in Chicago Heights IL. MTI provides effective and efficient customer complaint resolution, each customer is notified of his/her right to escalate at anytime to a customer care team leader or manager. The customer is also informed of his/her right to contact the Illinois Commerce Commission if for any reason his/her respective complaint has not been fully resolved.

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?

(877) 567-3722

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 a customers express permission to change, add, or delete any service or calling features. All marketing will be done in accordance with all applicable state and federal rules and regulations. MTI will clearly explain all applicable charges & will only bill for disclosed charges.**

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.) **Not applicable, applying as a wireless reseller**

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

YES NO

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. **Please see attached exhibit D**

TECHNICAL

26. Does Applicant utilize its own equipment and/or facilities? YES 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?

Verizon, Sprint, AT&T

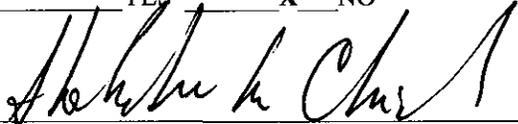
27. Please describe the nature of service to be provided (e.g., operator services, internet, debit cards, long distance service, data services, local service, prepaid local service).

MTI will be providing resold CRMS wireless service primarily to low income residents of Illinois whom qualify for the "Lifeline/Link-up" program. Handsets will be distributed free of charge and a predetermined number of minutes will be given to customers free each month.

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

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 NO



(Signature of Applicant)

VERIFICATION

This application shall be verified under oath.

OATH

State of **Illinois**)
) ss
County of **Cook**)

Ikechuku Chinwah makes oath and says that he is Secretary of **Midwestern Telecommunications 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 the above-named applicant in respect to each and every matter set forth therein

Ikechuku Chinwah

(Signature of affiant)

Subscribed and sworn to before me, a Notary Public in the State and County above named, this 22 day of March, 2010.



Arlee T. Holt

(Signature of person authorized to administer oath)