APPLICATION FOR PUBLIC INTEREST PAYPHONE IN KENTUCKY

Please complete this application for a public interest payphone. If you have questions regarding completion of the application form, please call us at (502) 564-3940. Incomplete application forms will not be processed.

Mail the application form to:

Kentucky Public Service Commission
211 Sower Boulevard
P.O. Box 615
Frankfort, KY 40602

After the application form is received, someone may contact you with further questions. If the application form is denied, you may write a letter to the Kentucky Public Service Commission and request a review of the denial. If the application for a public interest payphone is approved, the Kentucky Public Service Commission will attempt to contact a company to provide that payphone. If no company is willing to provide the public interest payphone, we will contact you.

Applicant’s Name/Title:
______________________________________________________________________
______________________________________________________________________

Business or Organization You Represent: ___________________________________

Business or Organization Name and Location for Requested Payphone Service:
______________________________________________________________________
______________________________________________________________________

Contact Name: ___________________________________________________________
Phone: _________________________________________________________________
Address: _______________________________________________________________
______________________________________________________________________

Type of Business: _________________________________________________________

Opening Date (if not open): _______________________________________________

Describe why a payphone is requested in terms of public health, safety, or welfare.
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Identify the government entity or agency that is sponsoring the location and provide the address and phone number of this entity or agency.

______________________________________________________________________

______________________________________________________________________

Is a low penetration rate for basic telephone service for households in the immediate area a factor in the nomination of this locale for a public interest payphone?

Circle: Yes No

If there is a payphone currently in operation at the proposed location, is it a coin-operated payphone?

Circle: Yes No

If you are proposing a new location, will the payphone be a coin-operated payphone?

Circle: Yes No

Will the payphone be part of a contract which provides direct monetary benefit to the location provider (i.e., the paying of commissions) from calls generated over that phone?

Circle: Yes No

If a payphone is proposed for property owned by a person or entity that has existing contracts for the placement of payphones at other locations, explain what efforts were undertaken to require placement of a payphone at the proposed location before the application was submitted.

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________

If there are other payphones on the property, is compensation paid to the owner or occupant of the property for these other payphones?

Circle: Yes No

What are the hours the requested public interest payphone will be made available to the public? From _____ a.m./p.m. To _____ a.m./p.m.

Circle the days the public interest payphone will be available.

M T W TH F S S

Will the payphone be indoors or outdoors?

Circle: Indoors Outdoors
If indoors, does the property owner agree to the placement of a telephone company sign outside the property directing the general public to the location of the payphone?

Circle: Yes No If No, why not?

____________________________________________________________________
____________________________________________________________________

Will the payphone be located at a site where those residing in that location cannot individually subscribe to their own telephone service?

Circle: Yes No

If yes, please explain your understanding of the reason phone service is not available to those residing in the area.

____________________________________________________________________
____________________________________________________________________

Will the payphone be located in an area where no other payphone exists or is reasonably accessible to the general public?

Circle: Yes No

What is the approximate distance to the payphone nearest the proposed location? Also, provide the address of the nearest payphone and the owner’s name.

____________________________________________________________________
____________________________________________________________________

To your knowledge, has there been a payphone at the proposed site before?

Circle: Yes No

If Yes, who was the provider? _____________________________________________

If Yes, when was the payphone removed? ___________________________________

I declare that the foregoing information is true and correct.

Signature Print Name Title

Date Phone number where you may be reached during business hours

-3-