Attachment C

Information Form for Telephone Utilities

Rev. 11/3/2010

Commonwealth of Kentucky
Public Service Commission

INFORMATION FORM FOR TELEPHONE UTILITIES OPERATING
PURSUANT TO KRS 278.541 through 278.544

Complete Name of Telephone Utility: Arium Networks LLC (formerly Crown Castle Fiber LLC

Physical Address of Principal Office:
Street: 1500 Corporate Drive
City: Canonsburg State: PA Zip: 15317

Primary Contact:
Name: Deborah Kelly Title: Tax Officer
Phone: (724) 416-2686 Fax: _____
E-Mail: puc.correspondence@ariumnetworks.com

Person Responsible for Answering Consumer Complaints:
Name: Rebecca Hussey Title: Vice President, Legal
Address (if different from above)
Street: _____
City: _____ State: _____ Zip: _____
Phone: 888-632-0931 Fax: _____

In accordance with KRS 278.542 (2), which requires telephone utilities operating pursuant to 2006 KRS 278.541 through KRS 278.544 to file with the Commission certain information, I, Jerry Karnick, on behalf of Arium Networks LLC do hereby certify that the foregoing information is true and correct to the best of my knowledge, as of this _____ day of August, 2026.

UTILITY: Arium Networks LLC

BY: Jerry Karnick
Jerry Karnick

STATE OF North Carolina
COUNTY OF Mecklenburg

The foregoing was signed, sworn to and acknowledged before me, the NOTARY PUBLIC, on this the 11 day of August, 2026.

WENDY C. WACHTER NOTARY PUBLIC MECKLENBURG COUNTY, NC My Commission Expires

Wendy C. Wachter
NOTARY PUBLIC

My Commission Expires: June 19, 2028

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