



## **ACKNOWLEDGEMENTS REGARDING Simple Signal VoIP SERVICES AND 911-TYPE SERVICES**

### **INTRODUCTION**

Pursuant to the Federal Communications Commission's VoIP E911 Order (WC Docket Nos. 04-36 and 05-196, FCC 05-116, released June 3, 2005), ¶¶ 48-49, and Section 9.5(e) of the FCC's rules, all interconnected VoIP providers are required to "advise every subscriber, both new and existing, prominently and in plain language, the circumstances under which E911 Service may not be available through the interconnected VoIP service or may be in some way limited by comparison to traditional E911 service."

Because Simple Signal is providing Simple Signal VoIP SERVICES to you we are obligated to make certain disclosures to you regarding the 911 services, and to obtain and retain your acknowledgment of having received and understood these disclosures. We request that, no later than July 28, 2006, you sign and return to us the acknowledgement at the end of this letter to acknowledge that you understand the limits of the 911 capabilities of Simple Signal Communications, Inc's Simple Signal VoIP SERVICES, and to acknowledge that you will inform your end-users of these limitations.

"911-type Services" means functionality that allows end-users to contact emergency services, including, without limitation, police, and fire and hospital medical services. 911-type Services may include Enhanced 911-type Service ("E911"), which has the ability to selectively route an emergency call to the primary 911 provider so that it reaches the correct emergency service located closest to the subscriber location and to transmit the identification of the subscriber location and telephone number (subject to the obligations to provide and maintain the subscriber location information). Enhanced 911-type Service is not immediately available in all areas, and is subject to the capabilities of the local PSAP.

### **Simple Signal VoIP Service**

Simple Signal VoIP Service currently supports 911-type Services utilizing the 911 infrastructure to complete calls to an emergency service dispatcher, in those rate centers where such service is available and you have chosen to activate it. You acknowledge and understand that 911-type dialing is NOT automatic, that you must take affirmative steps to effectuate such 911-type Services for each of your end-users and that such 911-type Services are different in a number of important ways from traditional 911 service as set forth below.

You acknowledge and understand that subject to the limitations set forth below, every end-user must provide an end-user location for each telephone number (in the form of a valid street address) and you are responsible for correctly and timely maintaining and updating such location information in the manner prescribed by Simple Signal.

You acknowledge and understand that 911-type Services will not be available to a particular end-user in the event of the assignment of a telephone number to a location outside of the geographic rate center associated with such telephone number; or the relocation of the calling device to which a telephone number has been assigned to a location away from the registered end-user location associated with such telephone number; or you fail to maintain and/or update end-user location information as required to enable that information to be registered in the local telephone company's Automatic Location

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Information database. Simple Signal E-911 service is not available on SoftPhones, Local Inbound numbers, or Virtual numbers.

You acknowledge and understand that 911-type Services will not be available to a particular end-user in the event of an outage, degradation or other disruption of electric power at the end-user location.

You acknowledge and understand that 911-type Services will not be available to a particular end-user in the event of an outage, degradation or other disruption of the end-user broadband Internet connection.

You acknowledge and understand that 911-type Services will not be available to a particular end-user in the event of a suspension of your account as a result of nonpayment or other breaches by you.

Simple Signal VoIP Service does not support 911-type Services in rate centers where these services are not available or if it is available and you have not chosen to activate it. You acknowledge and understand that: a call placed to 911 using Zero-1 Voice Services in these areas or if you have chosen not to activate it will attempt to complete, but it will not utilize the 911 infrastructure to selectively route calls to the primary 911 provider; the 911 call may or may not complete and if it does complete, it may complete to a 911 dispatcher or to a general or administrative line; and such administrator may or may not be specifically designated to receive the incoming 911 call and there may be a greater possibility that the general or administration line may produce a busy signal or will take longer to answer or not be answered at all; the 911 call may be completed to a 911 dispatcher (or to a general or administrative line) in a different geographic location than the caller's location; the caller's location information will not be displayed; and the callback number may or may not be displayed. The caller needs to communicate their location and phone number to the individual answering the call.

You acknowledge and understand all of the limitations and obligations set forth above for Simple Signal VoIP Service shall apply in the event such 911 calls are attempted in rate centers where 911-type service is not offered. .

#### **NEXT STEPS**

You should notify any end-user of the Simple Signal VoIP Services who may place calls, of these 911 limitations.

Please evidence your acknowledgement by signing where indicated on the next page and returning this notice via mail to Contact: 800-873-7670; Simple Signal, Inc., 34232 Pacific Coast Highway, Dana Point, CA 92629; [info@simplesignal.com](mailto:info@simplesignal.com)

Simple Signal appreciates in advance your support and compliance and we look forward to continue to provide you with superior VoIP services. Please be advised, in the event that Simple Signal does not receive timely acknowledgement, Simple Signal may be required by the FCC to terminate or suspend the applicable VoIP Services. If you have any questions, please contact us at 800-873-7670.

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**ACKNOWLEDGEMENTS TO SIMPLE SIGNAL REGARDING SIMPLE SIGNAL VoIP SERVICES  
AND 911-TYPE SERVICES**

I hereby acknowledge that:

- (1) My company understands the 911 limitations of the Simple Signal VoIP Service;
- (2) My company will inform its end-users of the 911 limitations of the Simple Signal Zero-1 Service, and will obtain and retain their acknowledgements of receiving and understanding this information;
- (3) My company will distribute warning stickers or other appropriate labels, as provided by Simple Signal, warning end-users of 911 limitations; and
- (4) I have authority to make this acknowledgement on behalf of my company.

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Title \_\_\_\_\_

Company \_\_\_\_\_

Date \_\_\_\_\_

Please evidence your acknowledgement by completing all the information requested above and returning this notice via mail to Contact: 800-873-7670; Simple Signal, Inc., 34232 Pacific Coast Highway, Dana Point, CA 92629; [info@simplesignal.com](mailto:info@simplesignal.com)



**Business Broadband – Simplified.**

Simple Signal, Inc.  
34232 Pacific Coast Hwy, Suite E  
Dana Point, CA 92629  
Phone (949) 429-4752  
Facsimile (866) 456-4720

**CREDIT APPLICATION**

Firm Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

RESALE # \_\_\_\_\_ Federal ID# \_\_\_\_\_

D&B# \_\_\_\_\_

Principal(s) \_\_\_\_\_

**BANK INFORMATION:**

Bank name \_\_\_\_\_

Account Number(s) \_\_\_\_\_

Attn \_\_\_\_\_ Phone \_\_\_\_\_

**CREDIT REFERENCES (Please do not list banks):**

1) \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Contact \_\_\_\_\_ Account # \_\_\_\_\_

2) \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Contact \_\_\_\_\_ Account # \_\_\_\_\_

3) \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Contact \_\_\_\_\_ Account # \_\_\_\_\_

Completed by \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

Please submit Credit Application to facsimile 1-866-456-4720, Attn: Accounting or e-mail to [ryanp@simplesignal.com](mailto:ryanp@simplesignal.com) – Thank you.

**The Standard Letter of Authorization Document**

The Standard Letter of Authorization (LOA) must be completed by a person authorized by the end-user customer. The LOA must contain the name and current billing address of the customer and the numbers that will be ported to Level 3 from the customer's current carrier. The LOA, which is a legal document, must be signed by a person who has the authority to act as a legal agent for the end-user customer. A sample Letter of Authorization is displayed here and can be printed out to be signed if the original document is not available.



Dear Customer:

Thank you for choosing **Level 3, LLC** as your service provider. As you are aware, you may continue to use your existing telephone number with **Level 3, LLC** local service. In order to transition your current telephone number to **Level, LLC** service, **Level, LLC** must work with your previous service provider to ensure that your service is uninterrupted, and where applicable, to ensure that your number is transferred.

Your prior service provider requires this letter as proof that you have explicitly authorized and requested that your service and current telephone number be transferred to another service provider. By filling in all the information requested below and signing and dating this letter, you provide us with the authorization to initiate the process of transferring your service and telephone number to **Level 3, LLC**. You will then be able to use your old number with your new **Level 3, LLC** service.

Please ensure the following information is completed accurately to prevent possible delays.

Company Name:

(Note that all TN's (Telephone Numbers) listed below must be associated with this Company Name)

Street Address: (Service Address):

Suite #:

City:

State:

ZIP Code:

Current Service Provider:

Telephone Number Begin	Telephone Number End	Provide BTN (Billing Telephone Number) For All Ported Numbers	Customer Requested Port Date

PLEASE REMOVE ANY FEATURES (i.e., Hunt Group) ASSOCIATED WITH THESE NUMBERS PRIOR TO SUBMITTING THIS LOA. ADDITIONALLY, PLEASE DO NOT PLACE ANY NEW SERVICE ORDERS WITH YOUR CURRENT SERVICE PROVIDER ON THIS ACCOUNT, AS THIS WILL CAUSE A DELAY IN PORTING YOUR NUMBERS.

By signing below, I designate **Level 3, LLC** or its designated agent to transfer my service from my current provider to **Level 3, LLC**. By signing below, I also authorize **Level 3, LLC** or its designated agent to transfer my current telephone number used to provide service so that **Level 3, LLC** may provide its service to me. By signing below, I also authorize **Level 3, LLC** or its designated agent to obtain billing information, customer service records, and other network information required to provide me with **Level 3, LLC** service. I understand that I may consult with **Level 3, LLC** as to whether a fee will apply to the change.

Print Name:

Date:

Signature:

Order Number:

**Please be sure to sign and date this form.**

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