



## COMPANY CODE REQUEST FORM

### REQUESTOR INFORMATION

\_\_\_\_\_  
Requestor's Name (Person)

\_\_\_\_\_  
Voice Number

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Date of Request

This contact will also be listed in iconectiv's routing products as "Agent for Service of Process". If you would like a different contact for this purpose, please notify iconectiv's TruOps TRA department at (732) 699-6700.

Please enter the contact information for the company contact in the fields below.

### COMPANY INFORMATION

\_\_\_\_\_  
Company Name/Full Legal Entity Name

\_\_\_\_\_  
Company Contact

\_\_\_\_\_  
Voice Number

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Company Contact Mailing Address

\_\_\_\_\_  
Email Address

For any CLEC or ULEC request, please list below the state(s) for which a company code is being requested\*. Enter check for each category requested in "New Code(s)" column below. If you have any questions, please contact the Company Code Administrator at 973-884-8105 or ccfees@neca.org.

Service	Company Category	New Code(s)	Operating State(s)	Expedited Order
Competitive Access Provider	CAP			
Ethernet Exchange	ETHX			
Competitive Local Exchange Carrier	CLEC			
Interexchange Carrier	IC			
Internet Protocol Enabled Services	IPES			
Local Exchange Reseller	LRSL			
Personal Communications Service	PCS			
PCS Reseller	PCSR			
Unbundled Local Exchange Carrier	ULEC			
Wireless Carrier	WIRE			
Wireless Reseller	WRSL			

\*CLECs and ULECs operating in more than one state will be assigned multiple codes.

**REQUIRED DOCUMENTATION:**

The following documentation is required to obtain a Company Code:

- Legal document (e.g., Articles of Incorporation with state seal or stamp, State Registration, etc.) as proof of existence and to reflect the telecommunication service provider's legal name.

**AND**

- For CLEC, ULEC, CAP, and Local Reseller service: A copy of the certification by the state Public Utility Commission.
- For Interexchange Carrier: Documents may vary from state to state. A copy of the State Public Utility Commission's approval is required when the State Commission regulates the Interexchange carrier/reseller service. If the service is not regulated by the State Commission, the required document may vary, so please contact us (contact information listed below).
- For ETHX: Proof of service and customers, e.g., contractual agreements with customers and a detailed description of the service including the areas where the service will be provided. We reserve the right to request additional documentation.
- For IPES: Proof of service and proof of customers, e.g., interconnection agreements (or evidence of an interconnection order pursuant to an approved tariff) and contractual agreements with end-user customers or regulatory administration approval, if applicable and a detailed description of the type of service being provided including the areas where the service will be provided. We reserve the right to request additional documentation.
- For Wireless or PCS service: A copy of the company's FCC radio/PCS license.
- For Wireless and PCS Resellers: A copy of the interconnection agreement with the wireless carrier.

PLEASE FAX THE COMPLETED COMPANY CODE REQUEST FORM AND THE ABOVE DOCUMENTATION TO +1 973 884 8082 OR E-MAIL TO [CCFEES@NECA.ORG](mailto:CCFEES@NECA.ORG) OR MAIL TO NECA ADDRESS BELOW:

Company Code Administrator  
NECA  
60 Columbia Road  
Building A – 2nd Floor  
Morristown, NJ 07960  
Fax: (973) 884-8082  
Phone: (973) 884-8105

**PRICING AND PAYMENT**

Submit \$375 for each new code request or \$500 for expedited processing. Code requests will be processed within 10 business days of receipt of required items for regular processing or within 3 business days for expedited processing.

Please indicate your payment method.

Credit Card

Once the Company Code application review is completed, NECA will send you an e-mail with a PayPal link for making the credit card payment.

***Please do not send any credit card information through e-mail.***

Check or Money Order

*Mail to :*  
Capital One Bank  
NECA Admin  
PO Box 2003  
Hicksville, NY 11802

ACH or Wire Transfer

*Routing info:*  
Capital One Bank  
NECA-Administrative Acct.  
ABA Transit: 021407912  
Account #7057249123