



**CTP APPLICATION FOR REGISTRATION**

**1. General Information**

Federal Identification Number 95-4862910

Date of Application October 30, 2006

Legal Name Airespring, Inc.

Trade Name (d/b/a)  
 in New Hampshire \_\_\_\_\_

Contact Person Cynthia Firstman, Director of Finance

Complete Mailing Address 6060 Sepulveda Blvd.  
Van Nuys, California 91411

Phone Number (818) 786-8990

Fax Number (818) 786-9225

E-mail Address info@airespring.com

**2. History of Applicant**

**a.** Has the applicant, or have any of the general partners, corporate officers, director of the company, limited liability company managers or officers been convicted of any felony not annulled by a court? No

**b.** In the past ten years, has the applicant, or have any of the general partners, corporate officers, director of the company, limited liability company managers or officers had any civil, criminal or regulatory sanctions or penalties imposed pursuant to any state or federal consumer protection law or regulation? No

**c.** In the past ten years, has the applicant, or have any of the general partners, corporate officers, director of the company, limited liability company managers or officers settled any civil, criminal or regulatory investigation or complaint involving any state or federal consumer protection law or regulation? No

**d.** Is the applicant, or are any of the general partners, corporate officers, director of the company, limited liability company managers or officers currently the subject of any pending civil, criminal or regulatory investigation or complaint involving any state or federal consumer protection law or regulation? No

**e.** Has the applicant, or have any of the general partners, corporate officers, director of the company, limited liability company managers or officers been denied certification in any other state. No

If so, please list each state. No

**f.** If the answer to any of the questions in a through e above is yes, please attach an explanation.

If you have any questions, please call the New Hampshire Public Utilities Commission at 603-271-2431.  
 Please mail any documents to the above address.



### 3. Service

List the three primary telecommunications services the company will provide:

a. See Exhibit A

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b.

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c.

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Identify the applicant's proposed service area:

Statewide

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### 4. Required Attachments

a. A copy of the New Hampshire Secretary of State Certificate of Authority

See Exhibit B

b. Proof of Surety Bond

See Exhibit C

c. Form CTP-1, Contact Information

See Exhibit D

d. A copy of the CTP's complete rate schedule

See Exhibit E

e. A copy of Form CTP-11, Adoption of Model Tariff, if applicable

See Exhibit F



**5. Compliance Statements**

I attest that the applicant will comply with all applicable New Hampshire laws and all Commission policies, rules and orders. [Puc 450.02] \_\_\_\_\_ (initial)

I attest that the applicant has the necessary managerial qualifications, technical competence and financial resources to operate the CTP for which the applicant seeks registration. \_\_\_\_\_ (initial)

I attest that the applicant agrees to use with the Verizon New Hampshire rates for intraLATA switched access, as filed in Tariff 85, including future changes, or charge a lower rate. In the event the applicant believes a higher rate is justified, the applicant will file a separate petition with evidence supporting the higher rate. \_\_\_\_\_ (initial)

**6. Signature**

I, Avi Lonstein, declare under penalty of perjury that I am authorized to make this verification for and on behalf of the applicant; that I have read the information provided by the applicant in the foregoing document and any and all attachments, and am informed and believe the same are true, and on that ground, affirm that the matters stated herein are true.

\_\_\_\_\_ Signed President \_\_\_\_\_ Title

Subscribed and sworn before me this \_\_\_\_\_ (day) of \_\_\_\_\_ (month) in the year \_\_\_\_\_

County of \_\_\_\_\_

State of \_\_\_\_\_

\_\_\_\_\_  
Notary Public/Justice of the Peace  
My Commission expires \_\_\_\_\_

## EXHIBITS

- Exhibit A -- Nature of Service
- Exhibit B -- New Hampshire Secretary of State
- Exhibit C -- Request for Waiver of Surety Bond
- Exhibit D -- CTP-1, Contact Information
- Exhibit E -- Rate Schedule
- Exhibit F -- CTP 11, Adoption of Uniform Tariff
- Exhibit G -- Contact Escalation List

## Exhibit A -- Nature of Services

Upon initiation of service in New Hampshire, Airespring, Inc., (Airespring) proposes to offer resold interexchange services. Such services will be provided by utilizing Verizon facilities and facilities-based interexchange carriers, such as Qwest, WorldCom, and Frontier/Global Crossing. Airespring intends to provide all forms of intrastate interexchange telecommunications switched and dedicated services including:

- A. 1+ and 101XXXX outbound dialing;
- B. 800/888 toll-free inbound dialing;
- C. Calling cards; and
- D. Data Services.

Exhibit B -- New Hampshire Secretary of State

Exhibit C -- Request for Waiver of Surety Bond

Airespring, Inc. will not require any customer deposits or do any advance billing

Exhibit D -- CTP-1, Contact Information





NEW HAMPSHIRE PUBLIC UTILITIES COMMISSION  
21 S. FRUIT ST., STE 10 CONCORD, NH 03301-2429  
603-271-2431  
www.puc.nh.gov

NHPUC Form CTP-1  
Contact Information  
Page 1 of 4  
Puc 469.02  
Rev. 12/06/04

### CONTACT INFORMATION

A telecommunications carrier must complete this form: 1) When requesting authorization to provide telecommunications service in New Hampshire by the Public Utilities Commission, 2) Annually, on or before March 31 of each year, or 3) When there have been changes to the information previously reported.

Check here if you would prefer electronic notices rather than notice by US Mail

Date October 30, 2006

#### 1. General Information

Federal Identification Number 95-4862910

CTP Authorization Number \_\_\_\_\_

Legal Name Airespring, Inc.  
Trade Name d/b/a  
in New Hampshire \_\_\_\_\_

Complete Mailing Address 6060 Sepulveda Blvd.  
VAN NUYS, CALIFORNIA 91411

Phone Number (818) 786-8990

Fax Number (818) 786-9225

E-mail Address INFO@AIRESRING.COM

Website WWW.AIRESRING.COM

#### 2. Person Responsible for Preparing the CTP Annual Report

Name CYNTHIA FIRSTMAN

Title DIRECTOR OF FINANCE

Complete Mailing Address 6060 Sepulveda Blvd.  
VAN NUYS, CALIFORNIA 91411

Phone Number (818) 786-8990

Fax Number (818) 786-9225

E-mail Address INFO@AIRESRING.COM



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Rev. 12/06/04

### 3. Person Responsible for Paying Assessment Bills

Name CYNTHIA FIRSTMAN

Title DIRECTOR OF FINANCE

Complete Mailing Address 6060 Sepulveda Blvd.

VAN NUYS, CALIFORNIA 91411

Phone Number (818) 786-8990

Fax Number (818) 786-9225

E-mail Address INFO@AIRESPRING.COM

### 4. Regulatory Contact

Name CYNTHIA FIRSTMAN

Title DIRECTOR OF FINANCE

Complete Mailing Address 6060 Sepulveda Blvd.

Van Nuys, California 91411

Phone Number (818) 786-8990

Fax Number (818) 786-9225

E-mail Address INFO@AIRESPRING.COM

### 5. Person that Commission's Consumer Affairs Department Should Call Regarding Customer Complaints

Name DAVID LONSTEIN

Title CUSTOMER SERVICE MANAGER

Complete Mailing Address 6060 Sepulveda Blvd.

VAN NUYS, CALIFORNIA 91411

Phone Number (818) 786-8990

Fax Number (818) 786-9225

E-mail Address DAVID@AIRESPRING.COM



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Rev. 12/06/04

#### 6. Director of Customer Service

Name DAVID LONSTEIN

Title CUSTOMER SERVICE MANAGER

Complete Mailing Address 6060 Sepulveda Blvd.

VAN NUYS, CALIFORNIA 91411

Phone Number (818) 786-8990

Fax Number (818) 786-9225

E-mail Address DAVID@AIRESPRING.COM

#### 7. Company Officer Responsible for Customer Service

Name DAVID LONSTEIN

Title CUSTOMER SERVICE MANAGER

Complete Mailing Address 6060 Sepulveda Blvd.

VAN NUYS, CALIFORNIA 91411

Phone Number (818) 786-8990

Fax Number (818) 786-9225

E-mail Address DAVID@AIRESPRING.COM

#### 8. End User Customer Service

Toll free 800 Number (888) 389-2899

Fax Number (818) 786-9225

E-mail Address INFO@AIRESPRING.COM

Hours of Operation The Company's services are provided on a monthly basis, and are available twenty-four (24) hours per day, seven (7) days per week.

#### 9. End User Repair Service

Toll free 800 Number (888) 389-2899

Fax Number (818) 786-9225

E-mail Address INFO@AIRESPRING.COM

Hours of Operation The Company's services are provided on a monthly basis, and are available twenty-four (24) hours per day, seven (7) days per week.



10. Names and Titles of Principal Officers

Name	Title
AVI LONSTEIN	CHAIRMAN, CEO, PRESIDENT AND SECRETARY
TONY LONSTEIN	EXECUTIVE VICE PRESIDENT
DANIEL LONSTEIN	VICE PRESIDENT AND CHIEF FINANCIAL OFFICER

11. Contact Escalation List

Please attach a contact escalation list, including, name, phone number and e-mail address for first level contacts, directors and company officers responsible for the following: network, interconnection; and provisioning.

See Exhibit G

12. Signature

I certify that the information on this form is true and correct to the best of my knowledge and belief subject to the penalty for making unsworn false statements under RSA 641:3.

Authorized  
 Representative  
 Signature \_\_\_\_\_

Title PRESIDENT

Printed Name AVI LONSTEIN

Date \_\_\_\_\_

NH IXC App

If you have any questions, please call the New Hampshire Public Utilities Commission at 603-271-2431. Please mail any documents to the above address.

Exhibit E -- Rate Schedule



**CTP RATE SCHEDULE  
 COVER SHEET**

**1. General Information**

Federal Identification Number 95-4862910

CTP Authorization Number \_\_\_\_\_ OR Date of Application October 30, 2006

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Trade Name (d/b/a)  
 in New Hampshire \_\_\_\_\_

Regulatory Contact Cynthia Firstman, Director of Finance

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Van Nuys, California 91411

Phone Number (818) 786-8990

Fax Number (818) 786-9225

E-mail Address info@airespring.com

**2. Attachments**

Attach rate sheets, and include

- a. The name of the service as appears on customer bills;
- b. The name of the service as appears on company provisioning documents;
- c. A brief description of service;
- d. The price at which the service is offered; and
- e. The date on which the price is effective.

Any rate schedule of more than ten pages shall include a table of contents and numbered pages.

See Continuation of Exhibit E

**3. Signature**

I certify that the information on this form is true and correct to the best of my knowledge and belief subject to the penalty for making unsworn false statements under RSA 641:3.

Authorized Representative Signature \_\_\_\_\_ Title President

Printed Name Avi Lonstein Date \_\_\_\_\_

**RATE SHEET**  
**TABLE OF CONTENTS**

Description

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## General Customer Rate Information

1. Name of the service as appears on customer bills:

Intrastate interexchange telecommunications services

2. Name of the service as appears on company provisioning documents:

1+ & 101XXXX Dialing

Travel Cards

Toll Free Service

Prepaid Calling Cards

Directory Assistance

3. A brief description of service:

**1+ Dialing** This service permits Customers to originate calls via switched or dedicated access lines, and to terminate intrastate calls. The Customer dials "1+" followed by "ten digits" or dials "101XXXX" followed by "1+ ten digits".

**Travel Cards** The Customer utilizes an 11 digit "toll-free" access number established by the Company to access a terminal. Upon receiving a voice prompt, the Customer uses push button dialing to enter an identification code assigned by the Company, and the ten digit number of the called party.

**Toll-Free Service** This service is inbound calling only where an 800, 888 or other toll-free prefix number rings into a Customer's premise routed to a specific telephone number or terminated over a dedicated facility.

**Prepaid Calling Cards** This service permits use of Prepaid Calling Cards for placing long distance calls. Customers may purchase Company Prepaid Calling Cards at a variety of retail outlets or through other distribution channels. Company Prepaid Calling Cards are available at a variety of face values ranging from five dollars (\$5.00), in one dollar (\$1.00) increments. Company Prepaid Calling Card service is accessed using the Company toll-free number printed on the card. The caller is prompted by an automated voice response system to enter his/her Authorization Code, and then to enter the terminating telephone number. Company's processor tracks the call duration on a real time basis to determine the number of Telecom Units consumed. The total consumed Telecom Units and applicable taxes for each call are deducted from the remaining Telecom Unit balance on the Customer's Company Prepaid Calling Card.

All calls must be charged against Prepaid Calling Card that has a sufficient Telecom Unit balance. A Customer's call will be interrupted with an announcement when the balance is about to be depleted.

When the balance is depleted, the Customer can either call the toll-free number on the back of the Company Prepaid Calling Card and "recharge" the balance on the card using a nationally recognized credit card, or the Customer can throw the card away and purchase a new one. Calls in progress will be terminated by the Company if the balance on the Company Prepaid Calling Card is insufficient to continue the call.



## General Customer Rate Information

A card will expire on the date indicated on the card, or if no date is specified, 6 months from the date of purchase, or the date of last recharge, whichever is later. The Company will not refund unused balances.

A credit allowance for Company Prepaid Calling Card Service is applicable to calls that are interrupted due to poor transmission, one-way transmission, or involuntary disconnection of a call. To receive the proper credit, the Customer must notify the Company at the designated toll-free customer service number printed on the Company Prepaid Calling Card and furnish the called number, the trouble experienced (e.g. cut-off, noisy circuit, etc.), and the approximate time that the call was placed.

When a call charged to a Company Prepaid Calling Card is interrupted due to cut-off, one-way transmission, or poor transmission conditions, the Customer will receive a credit equivalent of one Telecom Unit.

Credit allowances for calls pursuant to Company Prepaid Card Service do not apply for interruptions not reported promptly to the Company or interruptions that are due to the failure of power, equipment or systems not provided by the Company.

Credit for failure of service shall be allowed only when such failure is caused by or occurs due to causes within the control of the Company.

The Company will block all calls beginning with the NPA "900" and NXX "976" calls, therefore such calls can not be completed.

**Directory Assistance** Access to long distance directory assistance is obtained by dialing 1 + 555-1212 for listings within the originating area code and 1 + (area code) + 555-1212 for other listings. When more than one number is requested in a single call, a charge will apply for each number requested. A charge will be applicable for each number requested, whether or not the number is listed or published.

**Specialized Pricing Arrangements** Customized service packages and competitive pricing packages at negotiated rates may be furnished on a case-by-case basis in response to requests by Customers to the Company for proposals or for competitive bids. Service offered under this tariff provision will be provided to Customers pursuant to contract. Unless otherwise specified, the regulations for such arrangements are in addition to the applicable regulations and prices in other sections of the tariff. Specialized rates or charges will be made available to similarly situated Customers on a non-discriminatory basis. Discounts may apply based upon volume, affinity group plans, or term plan commitments.

**Emergency Call Handling Procedures** Emergency "911" calls are not routed to company, but are completed through the local network at no charge.

**Promotional Offerings** The Company may, from time to time, make promotional offerings to enhance the marketing of its services. These offerings may be limited to certain dates, times and locations. The Company will notify the Commission of such offerings as required by Commission rules and regulations.

### General Customer Rate Information

4. The price at which the service is offered; and

See Page 5 - 8 of this Rate Sheet

5. The date on which the price is effective.

Upon Approval from New Hampshire Public Utilities Commission

**RATES**

**1+ & 101XXXX Dialing**

\$0.15 per minute

A \$4.95 per month per number service charge applies.  
Billed in one minute increments

**Travel Cards**

\$.199 per minute

A \$.25 per call service charge applies.  
Billed in one minute increments

**Toll Free Service**

\$0.15 per minute

A \$10 per month per number service charge applies.

Billed in one minute increments

RATES (Cont'd.)

Prepaid Calling Cards

\$.025 Per Telecom Unit

A \$.99 per call service charge applies.

A one-time maintenance fee of \$1.00 applies after the 1<sup>st</sup> call.

RATES (Cont'd.)

Directory Assistance

\$.95

Returned Check Charge

\$25.00

**RATES (Cont'd.)**

**Payphone Dial Around Surcharge**

A dial around surcharge of \$.65 per call will be added to any completed INTRASTATE toll access code and subscriber toll-free 800/888 type calls placed from a public or semi-public payphone.

**Universal Service Fund Assessment & Presubscribed Interexchange Carrier Charge**

The Customer will be assessed a monthly Universal Service Fund Contribution charge on all telecommunications services, which in no event shall be less than the prevailing contribution percentage rate charged the Company on intrastate traffic by the Universal Service Administrative Company (or any successor) or any state agency or its administrator. A Presubscribed Interexchange Carrier Charge ("PICC") applies on a monthly basis to all Customer monthly bills at the prevailing rate.

Exhibit F -- CTP-11, Adoption of Uniform Tariff



**ADOPTION OF A MODEL TARIFF**

**1. General Information**

Federal Identification Number 95-4862910

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 in New Hampshire \_\_\_\_\_

Regulatory Contact Cynthia Firstman, Director of Finance

Complete Mailing Address 6060 Sepulveda Blvd.  
Van Nuys, California 91411

Phone Number (818) 786-8990

Fax Number (818) 786-9225

E-mail Address info@airespring.com

**2. Declaration of Intention to Adopt the NHPUC Uniform Tariff**

I attest that the applicant adopts the New Hampshire Uniform Tariff by reference as prescribed in PUC as of:

Date: \_\_\_\_\_

**DO NOT FILE A COPY OF NHPUC UNIFORM TARIFF**

**3. Signature**

I certify that the information on this form is true and correct to the best of my knowledge and belief subject to the penalty for making unsworn false statements under RSA 641:3.

Authorized Representative Signature \_\_\_\_\_ Title President

Printed Name Avi Lonstein Date \_\_\_\_\_

NH IXC App

If you have any questions, please call the New Hampshire Public Utilities Commission at 603-271-2431.  
 Please mail any documents to the above address.



Exhibit G -- Contact Escalation List

**Network, Interconnection and Provisioning Issues:**

**First Level Contact:**

Name: David Lonstein  
Title: Customer Service Manager  
Mailing address: 6060 Sepulveda Blvd.  
Van Nuys, California 91411  
Telephone number: (818) 786-8990  
Toll-Free number: (888) 389-2899  
Facsimile number: (818) 786-9225  
E-mail address: david@airespring.com

**Second Level Contact:**

Name: Cynthia Firstman  
Title: Director of Finance  
Mailing address: 6060 Sepulveda Blvd.  
Van Nuys, California 91411  
Telephone number: (818) 786-8990  
Toll-Free number: (888) 389-2899  
Facsimile number: (818) 786-9225  
E-mail address: info@airespring.com

**Third Level Contact:**

Name: Avi Lonstein  
Title: President  
Mailing address: 6060 Sepulveda Blvd.  
Van Nuys, California 91411  
Telephone number: (818) 786-8990  
Toll-Free number: (888) 389-2899  
Facsimile number: (818) 786-9225  
E-mail address: info@airespring.com