

Certificate of Pole Attachment Compliance
Of Brandenburg Telephone Company

Requesting Company: _____

Billing Address: _____

Date of Application Submission: _____

Filer of Application: _____

(name)

Contact Information: _____

(telephone number)

(email address)

Attachment Coordination: _____

(name)

Contact Information: _____

(telephone number)

(email address)

Escalation Contact: _____

(name)

Contact Information: _____

(telephone number)

(email address)

By my signature, I certify that I (listed above as the Filer Application for the Requesting Company) have reviewed the Brandenburg Telephone Company pole attachment standards and tariff, and applicable law (collectively, "Attachment Requirements"). To the best of my knowledge and ability the application for attachment to Brandenburg Telephone Company poles submitted on the Application Date shown above is in compliance with the Attachment Requirements.

Signature of Filer: _____

(signature)

Print Name: _____

Date: _____