
BellSouth Interconnection Services

675 West Peachtree Street
Atlanta, Georgia 30375

**Carrier Notification
SN91082152**

Date: January 11, 2001

To: All Interexchange Carriers (IXCs), Enhanced Service Providers (ESPs), and Toll Resellers

Subject: IXCs, ESPs, Toll Resellers - New Subscription Customer Name and Address (CNA) List Service Ordering Option Offering Via Customer Account Record Exchange (CARE) in a Resale Environment

BellSouth has scheduled to implement a new resale option within the current CNA Subscription List Service product, effective January 11, 2001, in all states with the exception of Alabama. The resale option will be implemented in Alabama on February 10, 2001. This new list is being offered to IXCs based on a listing of end-users that have migrated from BellSouth as their local provider, to a local resale provider that is doing business with BellSouth.

Ordering options for a listing of end-users in a resale environment will be the same as currently tariffed for CNA lists; however, unique Transaction Codes/Status Indicators (TCSIs) and Data Elements will be provided in accordance with Ordering and Billing Forum (OBF) guidelines. Please use the attached form when ordering a Local Resale CNA List.

The following TCSIs will be provided:

4401 – Working Telephone Numbers (WTNs) Selected to Requesting Access Carrier (AC) - Resale Environment. This code will be provided for end users that have the requesting IXC as their Preferred Interexchange Carrier (PIC).

4402 – Working Telephone Numbers (WTNs) Selected to Another Access Carrier (AC) - Resale Environment. This code will be provided for end-users that do not have the requesting IXC as their PIC, end-users that have an undecided PIC, and end-users that have made a choice of no PIC.

Data Elements to be provided on a Resale CNA list will be as follows:

Working Telephone Number; Terminal Number (if applicable); Customer Type Indicator; Jurisdictional Indicator; Subscribed PIC; and the Local Service Provider Identification.

If you have questions, please contact your BellSouth account team representative, the Equal Access Service Center at 1-800-456-9127, or Shirley Loewen, BellSouth's CARE Manager at (205) 988-7181.

Sincerely,

ORIGINAL SIGNED BY JIM BRINKLEY

Jim Brinkley – Senior Director
BellSouth Interconnection Services

Attachment

**Customer Information Request (CL-1058)
BellSouth Customer Name and Address (CNA) Service
BellSouth Customer Change Activity Service (CCAS) Service**

Request Number: _____
(BellSouth Internal Use)

**To: Manager – Equal Access Service Center
600 North 19th Street, 15th Floor
Birmingham, Alabama 35203
FAX (205) 321-1006**

(A) Service Ordering (Check One): CNA _____ CCAS _____

(B) BellSouth CABS Billing Number: 205 (C0) - _____

Billing Address: _____

City: _____ State: _____ Zip: _____

(C) Access Customer ACNA: _____ Access Customer CIC: _____

Associated CIC(s): _____

(D) Access Customer ACNA: _____

(E) Shipping Name: _____

(F) Access Customer Contact Name: _____

(G) Telephone Number: (____) _____

**Customer Information Request (CL-1058)
BellSouth Customer Name and Address (CNA) Service
BellSouth Customer Change Activity Service (CCAS) Service**

(H) Account Type Selection for **CNA Only**:

(Check One) BellSouth End Users _____

Resale End Users _____

(I) Geographic Selection for **CNA Only**:
(Check One)

(1) _____ Entire BellSouth Region

(2) _____ States(s) _____

(3) _____ Central Office(s) (CLLIs) _____

(4) _____ NPA/NXX(s) _____

(5) _____ (ZIP-3) ZIP Code(s) – 3 DIGITS _____

(6) _____ (ZIP-5) ZIP Code(s) – 5 DIGITS _____

(J) Additional Selections for **CNA Only**:
(Check One From Each Category)

SUBSCRIPTION TYPE:

_____ Subscribed to Ordering IC

_____ Not Subscribed to Ordering IC

_____ Subscribed as NONE
***(not orderable on Resale)**

_____ Subscribed as Undecided
***(not orderable on Resale)**

_____ Universal (all of the above)

CUSTOMER BASE:

_____ (RES) Residence

_____ (BUS) Business

_____ (RBS) Res/Bus

***On Resale, NONE and Undecided are inclusive in the Not Subscribed to Ordering IC option, therefore cannot be ordered as a stand-alone option.**

**Customer Information Request (CL-1058)
BellSouth Customer Name and Address (CNA) Service
BellSouth Customer Change Activity Service (CCAS) Service**

(J) (continued)
Additional Selections for **CNA Only**:
(Check One From Each Category)

JURISDICTIONAL TYPE:

OUTPUT MEDIUM:

___ InterLATA (JI=E)

___ Paper List

___ IntraLATA (JI=A)

___ CTAPE

___ Inter/Intra LATA (JI=B)

OUTPUT SEQUENCE

___ NXX

___ ZIP

(K) Request **CNA** Snapshot taken for the month of: _____ Year: _____

(L) Special Instructions: _____

Access Customer Name

Signature of Representative

Telephone Number



**Customer Information Request (CL-1058)
BellSouth Customer Name and Address (CNA) Service
BellSouth Customer Change Activity Service (CCAS) Service**

(M) Geographic Selections for **D-CCAS Only:**
(Check those that apply)

___ Entire BellSouth Region

___ Alabama

___ Kentucky

___ Tennessee

___ Florida

___ Louisiana

___ South Carolina

___ Georgia

___ Mississippi

(N) Additional Selections for **D-CCAS Only:**

SUBSCRIPTION TYPE:

CUSTOMER BASE:

(Check those that apply)

___ Not Subscribed to Ordering IC

___ (RES) Residence

___ (BUS) Business

___ (RBS) Res/Bus

JURISDICTION TYPE:

OUTPUT MEDIUM:

___ InterLATA (JI=E)

___ CONNECT: Direct

___ IntraLATA (JI=A)

___ Inter/Intra LATA (JI=B)

(O) CICs that customer does not wish to receive information:

Primary CIC: _____ Associated CIC(s): _____

(P) Transmission of D-CCAS should begin on: _____

(Five working days from receipt of order to establish service)

Access Customer Name

Signature of Representative

Telephone Number