**CRTC INTERCONNECTION STEERING COMMITTEE**

**CONTRIBUTION FORM:**

**Working Group:        CSCN                                  Date of Submission: 2023-02-26**

**Contribution #: 216C**

**TIF #:             113                                        File ID: CNCO216C**

**Task Title: Updating the Canadian Central Office Code (NXX) Assignment Guideline**

**Related to Task(s) ID:**

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**Distribution to: CSCN**

**Subject: Updates to the CO Code Part 1 form**

**Part 1 - CO Code Assignment, Reservation, Information Change, or Return**

This Part 1 form is to be used by a Code Applicant or Code Holder to apply for a CO Code Assignment, Reservation, Information Change, or Return. Use one Part 1 form for each CO Code (NXX) requested. One Part 1 form may be used to make the same information change for more than one CO Code or to return more than one CO Code. Electronically submit the completed form to the Canadian Numbering Administrator (CNA).

As of the date of issue of this form, the CNA contact information is:

Telephone: (+1) 613 702-0016

E-mail: COCodeApps@cnac.ca

Postal address: 880 Taylor Creek Dr, Rm 102, Orleans, ON K4A 0Z9

See <http://www.cnac.ca/about/contact_us.htm> for updates to CNA contact information.

If this is the first time that you have submitted a form to the CNA that must be signed by an Authorized Representative, please send a signed copy of this form electronically to the CNA.

I hereby certify that the following information is true and accurate to the best of my knowledge and that this application has been prepared in accordance with the currently applicable version of the Canadian Central Office Code (NXX) Assignment Guidelines.

|  |
| --- |
|  |
| Name of Authorized Representative of Code Applicant or Code Holder |
|  |
| Signature of Authorized Representative of Code Applicant or Code Holder |
|  |
| Title |
|  |
| Date |

1. **GENERAL INFORMATION**
	1. **Contact Information:**

**Code Applicant or Code Holder:**

|  |  |  |  |
| --- | --- | --- | --- |
| Entity Name: |       | Contact Name: |       |
| Address: |       | City, Province,  Postal Code: |            |
| Telephone: |       | Facsimile: |       |
| E-mail: |       |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | NPA(s): |       | LATA: |  888 |  | OCN: |       |
|  | Switch Identification (Switching Entity / POI)[[1]](#footnote-2): |       |
|  | City or Wire Center Name: |       | Exchange Area[[2]](#footnote-3) |       |

* 1. **Dates:**

|  |  |  |  |
| --- | --- | --- | --- |
| Date of Application |       |  Requested Effective Date[[3]](#footnote-4) |       |

A response to this application will be provided to the Code Applicant or Code Holder within fourteen calendar days from the date the CNA receives this application.

* 1. **Details relating to CO Code Assignment or Reservation[[4]](#footnote-5):**

|  |  |
| --- | --- |
| a) | In accordance with Telecom Regulatory Policy CRTC 2024-26, an attestation is required from applicants and their authorized representative(s) requesting geographical NANP numbers. I attest: |
| [ ]  | the newly assigned numbers will be used only for services that require geographic NANP numbers; |
| [ ]  | resources other than NANP geographic resources (such as non-geographic numbers or dummy numbers) cannot be used instead; and,  |
| [ ]  | the carrier does not have unused numbering resources from previous assignments that can be used instead. |
|  |  |
| b) | Type of Entity |
| [ ]  | Local Exchange Carrier  |
| [ ]  | Wireless Carrier  |
| [ ]  | Other (specify)       |
|  |  |
| c) | Type of service for which code is being requested: |
|  |       |

|  |  |
| --- | --- |
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|  |  |  |
| d) | Provide a traceable reference to the certification or authorization required by providing the certification type, date and reference number or provide other explanation: |
|  |       |
|  |  |  |
| e) | CO Code (NPA-NXX) preference(s) |       (optional) |
| [ ]  | If preference not available or no preference, CNA to select NPA-NXX |
|  |  |
| f) | Undesirable CO Code(s) (NPA-NXX(s)) |       (optional) |

* 1. **Type of Application:**

|  |
| --- |
| **CO Code Assignment:** |
| [ ]  | Initial Code for new Switching Entity/POI |
| [ ]  | Additional Code for Growth (Applicant must complete Section 1.6 and Appendix B) |
| [ ]  | Additional Code for Unique Purpose (Applicant must complete Section 1.7) |

|  |
| --- |
| **CO Code Reservation:**[[5]](#footnote-6) |
| [ ]  | Initial Code |
| [ ]  | Additional Code for Growth (Applicant must complete Section 1.6)  |
| [ ]  | Additional Code for Unique Purpose (Applicant must complete Section 1.7) |

|  |  |
| --- | --- |
| **Information Change:** NPA-NXX(s) affected -  |       |
|  Type of change: |  Details (provide attachment if needed):  |
| [ ]  | OCN  |        |
| [ ]  | Switching Entity / POI |        |
| [ ]  | Effective Date |        |
| [ ]  | Exchange Area |        |
| [ ]  | Other |        |

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| --- |
| **Return of CO Code(s)**: |
| [ ]  | NPA-NXX(s) being returned (provide attachment if needed): |       |
|  | Were these CO Code(s) entered into BIRRDS? . . . . . . . . . . . . . . . . Yes [ ]  No [ ]  |
|  | Do these CO Code(s) include any ported numbers or pending ports? Yes [ ]  No [ ]  |
|  | If yes, list CO Code(s) with ported numbers or pending ports: |       |
|  |  |  |

* 1. **Additional CO Code for Growth (See Section 4.2.1 of the Guidelines):**

The criteria for assignment of an Additional Code for Growth to a Switching Entity/POI are that:

* existing telephone numbers reported as available for assignment includes either all telephone numbers assigned within one Switching Entity/POI per unique Exchange Area or all telephone numbers assigned within the Exchange Area; and
* existing telephone numbers are projected to exhaust within 12 months where no Jeopardy Condition exists, or, where a Jeopardy Condition exists, within 4 months or other period specified in an approved Jeopardy Contingency Plan.

Select the applicable situation below:

|  |  |
| --- | --- |
| [ ]  | No NPA Jeopardy Condition:  |
|  | I hereby certify that the telephone numbers in existing CO Code(s) as defined above for the Switching Entity/POI or Exchange Area are projected to exhaust within 12 months of the date of this application and that the months-to-exhaust is documented on an Appendix B submitted to the CNA . |
| [ ]  | NPA Jeopardy Condition (see Section 9.5 of the Guidelines): |
|  | I hereby certify that the telephone numbers in existing CO Code(s) (NXX) as defined above for the Switching Entity/POI or Exchange Area are projected to exhaust within 4 months of the date of this application, or within the period specified in an approved Jeopardy Contingency Plan, and that the months-to-exhaust is documented on an Appendix B submitted to the CNA. |

* 1. **Additional CO Code for a Unique Purpose (See Section 4.2 of the Guidelines):**

A criterion for assignment of an Additional Code for a Unique Purpose is that no CO Code has been assigned for that purpose to the Switching Entity/POI. The Applicant must justify why an additional CO Code is required and explain why existing resources assigned to the applicant cannot satisfy this requirement[[6]](#footnote-7).

|  |  |
| --- | --- |
| [ ]  | **Code is necessary for distinct routing, rating or billing purposes** |
|  | Explanation: |       |

|  |  |
| --- | --- |
| [ ]  | **Code is necessary for reasons other than distinct routing, rating or billing purposes** |
|  | Explanation: |       |

1. This is the 11‑character iconectiv® COMMON LANGUAGE® CLLITM of the Code Applicant's Switching Entity/POI (physical or virtual). (CLLI is a trademark of iconectiv LLC, and COMMON LANGUAGE is a registered trademark of iconectiv LLC). [↑](#footnote-ref-2)
2. The Exchange Area on this form and on the Appendix B worksheet shall be a tariffed Exchange Area and shall be the Exchange Area where the CO Code will be or is assigned, rather than the Exchange Area containing the Switch Identification (Switching Entity/POI) CLLI, which may be the same or different. The name of the Exchange Area is generally the same as the name of the Rate Center. [↑](#footnote-ref-3)
3. For a CO Code assignment, the requested Effective Date shall be no earlier than 66 days and no later than 6 months after the date of application. The requested Effective Date for a CO Code reservation shall be no more than 12 months after the date of application. [↑](#footnote-ref-4)
4. Completion of section 1.4 is not required for a Return. [↑](#footnote-ref-5)
5. A CO Code that was reserved for an Applicant is not assigned to the Applicant, and must not be activated unless the Code Applicant has submitted a new Part 1 Request for a CO Code Assignment and the CO Code has been assigned to the Applicant [↑](#footnote-ref-6)
6. [↑](#footnote-ref-7)