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TAF Monthly Input Form

detailed costs for the Month of _____
 (must be remitted monthly)

Company ID#: _____
Contact Name: _____
Company Name: _____
Address: _____

Regulated Revenue:
 All Intrastate Regulated Revenue (This does NOT include such items as inside-wire and Internet fees): _____

Intercompany Payments:

a. Interexchange Carrier Access Charges:	
b. Local Terminating Access (Reciprocal Compensation):	
c. Bottleneck Billing & Collection Elements (ANI/Recording):	
d. Wholesale Services Purchased for Resale (i.e., Total Service Resale "TSR"):	
e. Wholesale Network Elements & Operator Services when bundled with services purchased at wholesale:	
Total (a+b+c+d+e):	

Life Line Cost:

a. *Billable Revenue <i>without</i> Lifeline discount applied:	
b. *Actual Billed Revenue <i>with</i> Lifeline discount applied:	
c. Federal Lifeline support applicable to intrastate jurisdiction:	
d. Subtotal (a-b-c):	
e. Discounts Associated with Installation/Reconnection:	
f. Federal Support for Installation/Reconnection:	
g. Subtotal (e-f):	
h. Automatic Enrollment/Removal Costs (Bell Atlantic & Frontier Telephone of Rochester):	
Total (d+g+h):	
i. Number of Lifeline Customers:	

E911 Cost:

a. Initial & Recurring Cost for collecting, processing and submitting data to the ALI Database Operator:	
b. ALI Database Operator Only - Cost related to initial loading of data:	
c. Trunking Costs from serving central office to another carrier's tandem control center:	
d. Costs for up to two "free" trunks from tandem to PSAP:	
e. Trunk Connection & Port Charges (T-Carriers limited to dedicated/reserved trunks):	
f. Selective Routing Expense:	
Total (a+b+c+d+e+f):	

PIP Cost:

a. Access Line Charge:	
b. Local Usage Charge:	
c. Feature Charge:	
Total (a+b+c):	

Other Costs:

a. Addnl.Cost1:	
b. Addnl.Cost2:	
Total (a+b):	

Note: *Excludes Subscriber Line Charge (SLC)

See Operational Procedures Manual for details