

Control Number: 50447



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PROJECT NO. 50447



UTILITY: FIVE AREA TELEPHONE COOPERATIVE, INC. QUARTER ENDING: March 2020

TELEPHONE SERVICE QUALITY REPORT				
		REPORT MONTHS		
SERVICE ORDERS	Objective	<u>JAN</u>	<u>FEB</u>	MARCH
% Regular orders completed in 5 working days	90%	<u>100%</u>	<u> 100%</u>	<u>4 100%</u>
% Primary orders completed in 5 working days	95%	100%	<u> 1009</u>	<u>4 100%</u>
% Installation commitments met	90%	100%	<u>6 100%</u>	<u>6 100%</u>
% All Orders Completed in 30 days	99%	100%	<u>6 100%</u>	<u>6 100%</u>
% All Orders Completed in 90 days	100%	100%	<u>6 100%</u>	<u>6 100%</u>
ANSWER TIME				
Toll & Assistance ("0") answer time Average answer time in seconds (or 85% within ten seconds)	3.3	_3_	_3_	3_
Directory assistance answer time Average answer time in seconds (or 85% within ten seconds)	5.9	3	_3	_3_
Repair service answer time Average answer time in seconds (or 90% within twenty seconds) TROUBLE REPORTS	5.9	3	_3	_3_
Customer trouble reports per 100 access lines	6.0	<u>1.46</u>	<u>.13</u>	1.18
% of out-of-service reports cleared in 8 working hours	90	<u>100%</u>	100%	100%
% Repeated Trouble Reports	22%	0%	0%	0%

Contact Name: <u>Daniela Bustillos</u>

Contact Telephone Number: 806-272-5533

STATEMENT OF ATTESTATION

STATE OF TEXAS

COUNTY OF Bailey

I, <u>Mark Washington</u>, the at testator, sign my name to this instrument this <u>6th</u> day of <u>April</u>, <u>2020</u>, and being a duly authorized officer of <u>Five Area Telephone Cooperative</u>, <u>Inc.</u> do hereby declare and affirm that the attached report titled <u>Telephone Service Quality Report</u> was prepared with my personal knowledge and the information contained therein is true and correct.

Mark W.	shyes
Signature	4
Chief Executive C	Officer
Title	
4/6/2020	
Date	