



Filing Receipt

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Control Number - 56001

Item Number - 190

UTILITY: Consolidated Communications oQUARTER ENDING: December 31, 2024

TELEPHONE SERVICE QUALITY REPORT

PROJECT # 56001

		<u>REPORT MONTHS</u>		
	Objective	Oct	Nov	Dec
<u>SERVICE ORDERS</u>				
1. % Regular orders completed in 5 working days	≥90%	<u>100%</u>	<u>100%</u>	<u>95%</u>
2. % Primary orders completed in 5 working days	≥95%	<u>100%</u>	<u>92%</u>	<u>100%</u>
3. % Installation commitments met	≥90%	<u>99%</u>	<u>99%</u>	<u>91%</u>
4. % All Orders Completed in 30 days	≥99%	<u>100%</u>	<u>100%</u>	<u>100%</u>
5. % All Orders Completed in 90 days	100%	<u>100%</u>	<u>100%</u>	<u>100%</u>
6. Number of held regrade orders at month end	<=1	<u>0</u>	<u>0</u>	<u>0</u>

ANSWER TIME *

7. Toll & Assistance ("0") answer time % answered within 10 secs	≥85%	<u>89%</u>	<u>89%</u>	<u>88%</u>
8. Directory assistance answer time % answered within 10 secs	≥85%	<u>89%</u>	<u>89%</u>	<u>88%</u>
9. Repair service % within 20 seconds	≥90%	<u>97%</u>	<u>94%</u>	<u>97%</u>

*Lutkin/Conroe and Fort Bend rate areas share common business office and repair center. Op Svc outsourced.

TROUBLE REPORTS


10. Customer trouble reports per 100 access lines	<=3	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>
11. % of out-of-service reports cleared in 8 working hours	≥90%	<u>82%</u>	<u>81%</u>	<u>86%</u>
12. % Repeated Trouble Reports	<=22%	<u>0%</u>	<u>0%</u>	<u>0%</u>

STATEMENT OF ATTESTATION

STATE OF TEXAS

COUNTY OF MONTGOMERY

I, Julie Poon, the attestator, sign my name to this instrument this 18 day of November, 2024,
being a duly authorized signatory of Consolidated Communications of Texas Company do hereby
declare and affirm that the attached report titled Telephone Service Quality Report was prepared
with my personal knowledge and the information contained therein is true and correct.

_____
Signature_____
Regulatory Specialist
Title_____
February 18, 2025