Print Form

STATE OF SOUTH CAROLINA
SECRETARY OF STATE

APPLICATION FOR A STATE-ISSUED CERTIFICATE OF FRANCHISE AUTHORITY

Pursuant to state law, a person or entity seeking to provide cable or video service must have a certificate of franchise authority, either an existing certificate issued by a local government under prior law, or upon expiration of that certificate issued by a local government, a state-issued certificate of franchise authority issued by the Secretary of State under S.C. Code of Laws §58-12-310(B).

TYPE OR PRINT CLEARLY WITH BLACK INK

Pursuant to S.C. Code Section 58-12-310, the undersigned hereby applies for authorization to provide cable or video service in the state of South Carolina.

1. The name of the applicant is _____

2. The applicant is providing ☐ Cable Service OR ☐ Video Service

3. The street address of the applicant is _____
Street Address

_____
City County State Zip Code

The mailing address of the applicant is _____

_____

4. The municipalities and unincorporated areas of counties that are proposed to be served by the applicant are to be described in the accompanying Affidavit in Support of State-Issued Certificate of Franchise Authority. For each of the municipalities and unincorporated areas of counties so described, provide the name, address and telephone number for the person to whom the Notice of Application for a State-Issued Certificate of Franchise Authority should be provided.

Municipality/Area	Name & Title	Address	Telephone No.	Expiration Date of Current Franchise (if applicable)

5. This application is accompanied by an affidavit signed by an officer or general partner of the applicant and fee as required by S.C. Code Section 58-12-310(B).

Date_____

_____
Officer/General Partner's Signature

_____
Type or Print Name

_____
Address

_____

_____
Telephone Number

AFFIDAVIT IN SUPPORT OF APPLICATION
FOR STATE-ISSUED CERTIFICATE OF FRANCHISE AUTHORITY

PERSONALLY appeared before me the undersigned who being duly sworn according to law, deposes and says on oath:

My name is _____ and my title/position is_____ _____ of _____.This affidavit is based upon my personal knowledge of the facts contained in the Application for State-Issued Certificate of Franchise Authority and this affidavit. I certify and affirm that all such facts are true and correct. I affirm that the applicant agrees to comply with all applicable federal and state laws and regulations.

In this application the applicant seeks to provide cable or video services in the following areas:

_____

_____

_____

_____

_____

_____

_____

(Written description of the municipalities and unincorporated areas of the counties to be served in whole or in part.
A map or other graphic representation may supplement, but not substitute for, the written description.)

The principal place of business for the applicant is located at _____

_____

The principal executive officers of the applicant are:

Name & Title	Address	Telephone No.

Dated this _____ day of _____, _____.

SWORN to and subscribed before me, this
_____ day of _____, _____

_____
Officer/General Partner's Signature

_____
Type or Print Name

_____

Notary Public for _____
My Commission Expires:_____

_____
Address

_____

_____
Telephone Number

FILING INSTRUCTIONS

1. Two copies of this form (application and affidavit), the original and either a duplicate original or conformed copy, must be filed.

2. If the space in this form is insufficient, please attach additional sheets containing a reference to the appropriate paragraph in this form.

3. Filing Fee (payable to the Secretary of State at the time of filing this document) - $110.00

Return to: South Carolina Secretary of State
Attn: Wendy B. Holcombe
1205 Pendleton Street, Suite 525
Columbia, SC 29201

SPECIAL NOTES

PURSUANT TO STATE LAW, A PERSON OR ENTITY SEEKING TO PROVIDE CABLE OR VIDEO SERVICE MUST HAVE A CERTIFICATE OF FRANCHISE AUTHORITY, EITHER AN EXISTING CERTIFICATE ISSUED BY A LOCAL GOVERNMENT UNDER PRIOR LAW, OR UPON EXPIRATION OF THAT CERTIFICATE ISSUED BY A LOCAL GOVERNMENT, A STATE-ISSUED CERTIFICATE OF FRANCHISE AUTHORITY ISSUED BY THE SECRETARY OF STATE UNDER S.C. CODE OF LAWS §58-12-310(B).

PURSUANT TO S.C. CODE §58-12-310(B)(3), A HOLDER OF A STATE-ISSUED CERTIFICATE OF FRANCHISE AUTHORITY MUST BEGIN TO DEPLOY SERVICE IN EACH OF THE MUNICIPALITIES AND IN EACH OF THE UNINCORPORATED AREAS OF COUNTIES DESCRIBED IN THE APPLICATION WITHIN ONE YEAR FROM THE DATE OF ISSUANCE OR THE CERTIFICATE BECOMES NULL AND VOID.

PURSUANT TO S.C. CODE §58-12-310(K), THE HOLDER OF A STATE-ISSUED CERTIFICATE OF FRANCHISE AUTHORITY MUST GIVE WRITTEN NOTIFICATION TO A MUNICIPALITY OR COUNTY OF THE DATE IT WILL ACTUALLY BEGIN PROVIDING SERVICE IN ANY PART OF SUCH MUNICIPALITY OR COUNTY.

S.C. CODE §58-12-360 PROVIDES THAT THE S.C. DEPARTMENT OF CONSUMER AFFAIRS MUST RECEIVE COMPLAINTS FROM CUSTOMERS OF COMPANIES WHICH HOLD A STATE-ISSUED CERTIFICATE OF FRANCHISE AUTHORITY IN ACCORDANCE WITH S.C. CODE §37-6-117. CONTACT INFORMATION FOR THE DEPARTMENT OF CONSUMER AFFAIRS MUST BE PRINTED ON THE CUSTOMER'S BILL.