



Department of Business License

Vincent V. Queano, Director

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APPLICATION FOR FRANCHISE AGREEMENT – PUBLIC UTILITIES

• Please fill out form completely; use **black ink only**; *incomplete, illegible, or altered application forms will be returned.*

BUSINESS INFORMATION

Date of Application: March 25, 2024	Business/ Entity Name: Rio Virgin Telecom
Fictitious Firm Name(FFN)/ Doing Business As (DBA): Reliance Connects	Classification/ Category (NAICS Code): 517111
Have you registered with the Nevada Secretary of State? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NV Business ID (required): NV19541000341

OWNERSHIP INFORMATION (Must total 100%; list all business owners, and/or officers.)

Type of Business Ownership (select one)	<input type="checkbox"/> Sole Proprietorship	<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Limited Liability Co.
	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Other:

BUSINESS LOCATION AND CONTACT INFORMATION

Business Location/ Mailing Address

Business/ Location Address: 61 W Mesquite Blvd.	City/ State: Mesquite, Nevada	Zip Code: 89027	Country: United States
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Check here if Mailing Address is the same as the Business Address. If different, please provide current mailing address on next line.

Mailing Address: PO Box 299	City/ State: Mesquite Nevada	Zip Code: 89024	Country: United States
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Business Contact Information

Business Email: tietjenj@rconnects.net	Business Phone: 702-346-5211	Business Fax: 702-346-5216
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Authorized Contact Information

Authorized Contact Name (First, M.I., Last): Josh Tietjen	Authorized Contact Title: Area Manager	
Email Address: tietjenj@rconnects.net	Primary Phone Number: 702-345-6138	Alternate Phone Number: 702-346-2511

FRANCHISE INFORMATION

Length of Term Desired (not to exceed 10 years): 10 years	Public Utilities Commission of Nevada (PUCN) Certificate: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Certificate Number: 548
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Has the applicant ever been denied a license or had a license suspended or revoked for any reason? Yes* No

***If you answered "Yes" to the question above, please attach a detail description of the suspension, revocation, and/or denial.**

List all third parties that the applicant is aware of at the time of application that will be using the applicant's facilities in the County's rights-of-way:	<input type="checkbox"/> List is provided below <input type="checkbox"/> List is attached <input checked="" type="checkbox"/> None
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Please attach the following to the application:

- Order and Certificate issued by the PUCN
- Map of the Service Area desired/ Requested
- Disclosure of Ownership Form
- Map of proposed initial route (Initial Franchise Application Only)

SIGNATURES (requires signatures of owner, officer, authorized or legal signer)

I certify the information provided herein and attached is true and accurate to the best of my knowledge. I understand that providing false, misleading, or fraudulent statements on this application or supporting documentation may be grounds for denial of this license or later revocation, suspension, or non-renewal.

 Signature	Josh Tietjen Area Manager Print Name and Title	3-25-2024 Date
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PUBLIC UTILITIES COMMISSION OF NEVADA

CORRECTED CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY
(Underlining denotes correction)

Rio Virgin Telephone Company d/b/a Reliance Connects

CPC 548 Sub 2
(supercedes and replaces
CPC 548 Sub 1)
Docket No. 08-01017

The Public Utilities Commission of Nevada ("Commission") hereby grants, pursuant to the Commission's decision on March 13, 2008, Rio Virgin Telephone Company d/b/a Rio Virgin Telephone & Cablevision the authority to operate under the fictitious name of Rio Virgin Telephone Company d/b/a Reliance Connects and to continue to operate as a provider of local telephone service in the communities of Mesquite, Bunkerville and Riverside, within the state of Nevada.

Rio Virgin Telephone Company d/b/a Reliance Connects is hereby granted this Certificate of Public Convenience and Necessity as evidence of its authority to operate as a provider of local telephone service in the communities of Mesquite, Bunkerville and Riverside, within the state of Nevada, as set fourth in Attachment "A", attached hereto, subject to all applicable provisions of the Nevada Revised Statutes; all applicable rules, regulations and orders of the Commission, and such terms, conditions and limitations as are now or may hereafter be attached to the exercise of the privileges granted to the utility

This Certificate of Public Convenience and Necessity supercedes and replaces, in all respects, CPC 548 Sub 1. CPC 548 Sub 1 shall be, and the same is hereby, cancelled.

As a condition of this Certificate, Rio Virgin Telephone Company d/b/a Reliance Connects shall render reasonably continuous and adequate service to the public within its service area and in pursuance of the authority granted. Nothing contained herein shall be construed to create a franchise or to constitute the grant of an irrevocable Certificate. Failure to comply with all applicable provisions of the Nevada Revised Statutes; all applicable rules, regulations and orders of the Commission; and any applicable terms, conditions and limitations attached to the granted privileges shall comprise sufficient grounds for the suspension or revocation of this Certificate.

This Certificate of Public Convenience and Necessity shall not be conveyed or transferred without the Commission's prior approval

Any errors in the drafting of this Certificate of Public Convenience and Necessity may be corrected without further proceedings by the Commission.

By the Commission,



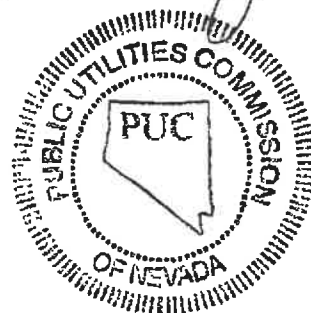
JO ANN P. KELLY, Chairman

Attest:


CRYSTAL JACKSON, Commission Secretary

Dated. Carson City, Nevada

3/28/08
(SEAL)



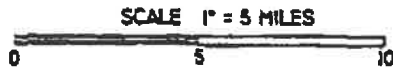
ATTACHMENT "A"

RIO VIRGIN TELEPHONE COMPANY
 d/b/a Reliance Connects
 Mesquite, Nevada

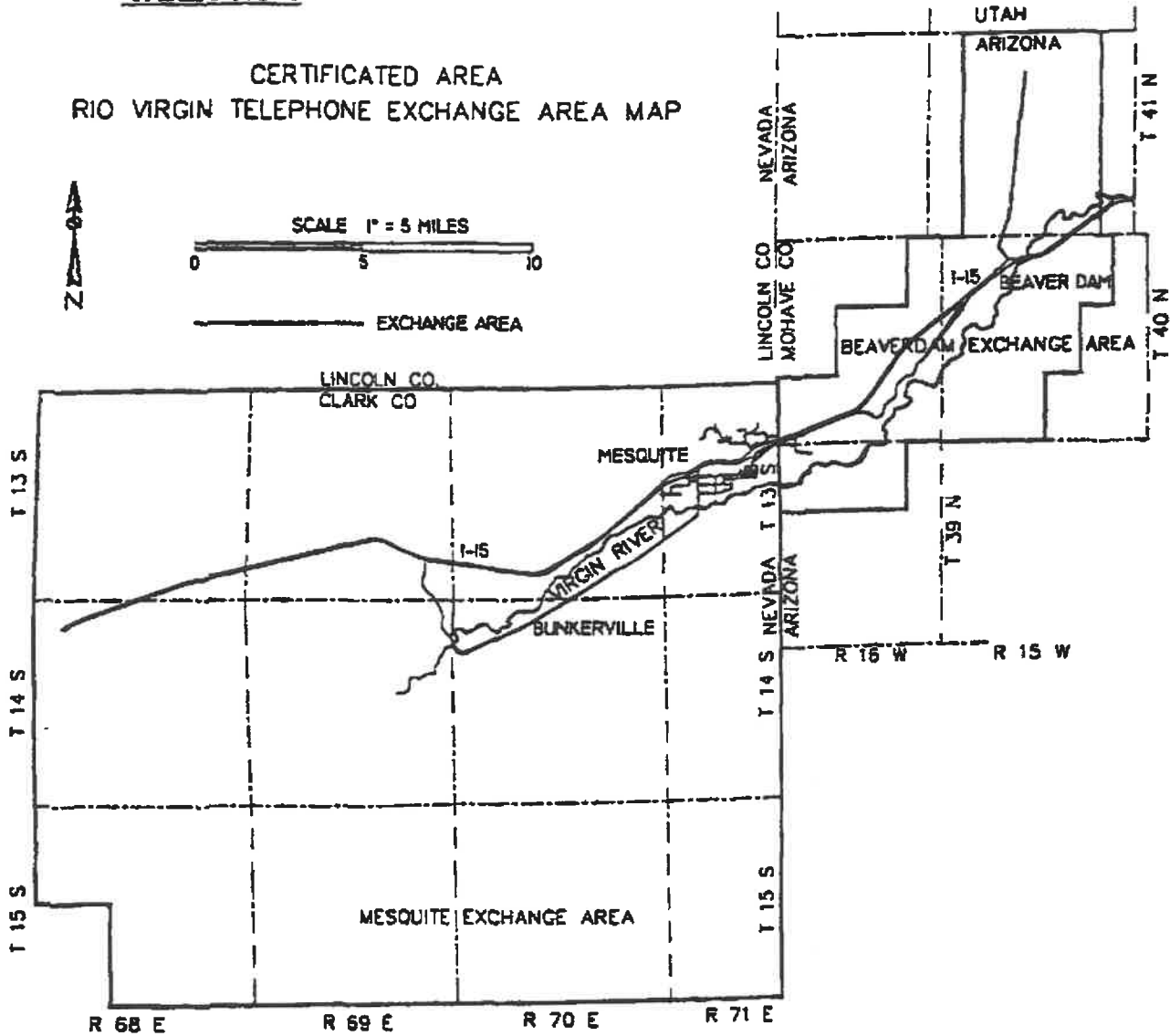
Second Revised SHEET P S C N NO 1
 cancels
First Revised SHEET P S C N NO 1

TARIFF NO 1

CERTIFICATED AREA
 RIO VIRGIN TELEPHONE EXCHANGE AREA MAP



— EXCHANGE AREA



ISSUED January 22, 2008
 EFFECTIVE February 22, 2008
 ADVICE 69

ISSUED BY
 Brenda Crosby
 Vice President
 PO Box 189
 Estacada, OR 97023

RIO VIRGIN TELEPHONE COMPANY
d/b/a Reliance Connects
Mesquite, Nevada

Second Revised SHEET S C N NO 2
cancels
First Revised SHEET P S C N NO 2

TARIFF NO 1

Schedule No A - 3

CERTIFICATED AREA

B MESQUITE EXCHANGE AREA – LEGAL DESCRIPTION

Commencing at the point of origin on the Arizona-Nevada State Line at the Southeasterly corner of Section 34, T 15S , R 71E , M D B & M thence Westerly to the Southwest corner of Section 33, T 15S , R 68E Thence Northerly to the Southwest corner of Section 16, T 15S , R 68E Thence Westerly to the Southwest corner of Section 18, T 15S , R 68E Thence Northerly to the Northwest corner of Section 6, T 13S , R 68E Thence Easterly to (the Nevada-Arizona state line) the Northeast corner of Section 3, T 13S , R 71E Thence Southerly following the Nevada-Arizona state line to the point of origin

(This legal description covers only the Nevada portion of the exchange area)

ISSUED January 22, 2008
EFFECTIVE February 22, 2008
ADVICE 69

ISSUED BY
Brenda Crosby
Vice President
PO Box 189
Estacada, OR 97023

**INSTRUCTIONS FOR COMPLETING THE
DISCLOSURE OF OWNERSHIP/PRINCIPALS FORM**

Purpose of the Form

The purpose of the Disclosure of Ownership/Principals Form is to gather ownership information pertaining to the business entity for use by the Board of County Commissioners ("BCC") in determining whether members of the BCC should exclude themselves from voting on agenda items where they have, or may be perceived as having a conflict of interest, and to determine compliance with Nevada Revised Statute 281A.430, contracts in which a public officer or employee has interest is prohibited.

General Instructions

Completion and submission of this Form is a condition of approval or renewal of a contract or lease and/or release of monetary funding between the disclosing entity and the appropriate Clark County government entity. Failure to submit the requested information may result in a refusal by the BCC to enter into an agreement/contract and/or release monetary funding to such disclosing entity.

Detailed Instructions

All sections of the Disclosure of Ownership form must be completed. If not applicable, write in N/A.

Business Entity Type – Indicate if the entity is an Individual, Partnership, Limited Liability Company, Corporation, Trust, Non-profit Organization, or Other. When selecting 'Other', provide a description of the legal entity.

Non-Profit Organization (NPO) - Any non-profit corporation, group, association, or corporation duly filed and registered as required by state law.

Business Designation Group – Indicate if the entity is a Minority Owned Business Enterprise (MBE), Women-Owned Business Enterprise (WBE), Small Business Enterprise (SBE), Physically-Challenged Business Enterprise (PBE), Veteran Owned Business (VET), Disabled Veteran Owned Business (DVET), or Emerging Small Business (ESB). This is needed in order to provide utilization statistics to the Legislative Council Bureau, and will be used only for such purpose.

- **Minority Owned Business Enterprise (MBE):** An independent and continuing business for profit which performs a commercially useful function and is at least 51% owned and controlled by one or more minority persons of Black American, Hispanic American, Asian-Pacific American or Native American ethnicity.
- **Women Owned Business Enterprise (WBE):** An independent and continuing business for profit which performs a commercially useful function and is at least 51% owned and controlled by one or more women.
- **Physically-Challenged Business Enterprise (PBE):** An independent and continuing business for profit which performs a commercially useful function and is at least 51% owned and controlled by one or more disabled individuals pursuant to the federal Americans with Disabilities Act.
- **Small Business Enterprise (SBE):** An independent and continuing business for profit which performs a commercially useful function, is not owned and controlled by individuals designated as minority, women, or physically-challenged, and where gross annual sales does not exceed \$2,000,000.
- **Veteran Owned Business Enterprise (VET):** An independent and continuing Nevada business for profit which performs a commercially useful function and is at least 51 percent owned and controlled by one or more U.S. Veterans.
- **Disabled Veteran Owned Business Enterprise (DVET):** A Nevada business at least 51 percent owned/controlled by a disabled veteran.
- **Emerging Small Business (ESB):** Certified by the Nevada Governor's Office of Economic Development effective January, 2014. Approved into Nevada law during the 77th Legislative session as a result of AB294.

Business Name (include d.b.a., if applicable) – Enter the legal name of the business entity and enter the "Doing Business As" (d.b.a.) name, if applicable.

Corporate/Business Address, Business Telephone, Business Fax, and Email – Enter the street address, telephone and fax numbers, and email of the named business entity.

Nevada Local Business Address, Local Business Telephone, Local Business Fax, and Email – If business entity is out-of-state, but operates the business from a location in Nevada, enter the Nevada street address, telephone and fax numbers, point of contact and email of the local office. Please note that the local address must be an address from which the business is operating from that location. Please do not include a P.O. Box number, unless required by the U.S. Postal Service, or a business license hanging address.

Number of Clark County Nevada Residents employed by this firm. (Do not leave blank. If none or zero, put the number 0 in the space provided.)

List of Owners/Officers – Include the full name, title and percentage of ownership of each person who has ownership or financial interest in the business entity. If the business is a publicly-traded corporation or non-profit organization, list all Corporate Officers and Directors only.

For All Contracts – (Not required for publicly-traded corporations)

- 1) Indicate if any individual members, partners, owners or principals involved in the business entity are a Clark County full-time employee(s) or appointed/elected official(s). If yes, the following paragraph applies.

In accordance with NRS 281A.430.1, a public officer or employee shall not bid on or enter into a contract between a government agency and any private business in which he has a significant financial interest, except as provided for in subsections 2, 3, and 4.

- 2) Indicate if any individual members, partners, owners or principals involved in the business entity have a second degree of consanguinity or affinity relation to a Clark County full-time employee(s) or appointed/elected official(s) (reference form on Page 2 for definition). If YES, complete the Disclosure of Relationship Form. Clark County is comprised of the following government entities: Clark County, Department of Aviation (McCarran Airport), and Clark County Water Reclamation District. Note: The Department of Aviation includes all of the General Aviation Airports (Henderson, North Las Vegas, and Jean). **This will also include Clark County Detention Center.**

A professional service is defined as a business entity that offers business/financial consulting, legal, physician, architect, engineer or other professional services.

Signature and Print Name – Requires signature of an authorized representative and the date signed.

Disclosure of Relationship Form – If any individual members, partners, owners or principals of the business entity is presently a Clark County employee, public officer or official, or has a second degree of consanguinity or affinity relationship to a Clark County employee, public officer or official, this section must be completed in its entirety.

DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> ESB
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Physically Challenged Business Enterprise	Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business
Number of Clark County Nevada Residents Employed:					35	
Corporate/Business Entity Name:		Rio Virgin Telecom				
(Include d.b.a., if applicable)		Reliance Connects				
Street Address:		61 W Mesquite Blvd.		Website: relianceconnects.com		
City, State and Zip Code:		Mesquite, Nevada 89027		POC Name: Josh Tietjen Email: tietjenj@rconnects.net		
Telephone No:		702-346-5211		Fax No: 702-346-5216		
Nevada Local Street Address: (If different from above)				Website:		
City, State and Zip Code:				Local Fax No:		
Local Telephone No:				Local POC Name: Email:		

All entities, with the exception of publicly-traded and non-profit organizations, must list the names of individuals holding more than five percent (5%) ownership or financial interest in the business entity appearing before the Board.

Publicly-traded entities and non-profit organizations shall list all Corporate Officers and Directors in lieu of disclosing the names of individuals with ownership or financial interest. The disclosure requirement, as applied to land-use applications, extends to the applicant and the landowner(s).

Entities include all business associations organized under or governed by Title 7 of the Nevada Revised Statutes, including but not limited to private corporations, close corporations, foreign corporations, limited liability companies, partnerships, limited partnerships, and professional corporations.

Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
_____	_____	_____
_____	_____	_____
_____	_____	_____

This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? Yes No

- Are any individual members, partners, owners or principals, involved in the business entity, a Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)?
 Yes No (If yes, please note that County employee(s), or appointed/elected official(s) may not perform any work on professional service contracts, or other contracts, which are not subject to competitive bid.)
- Do any individual members, partners, owners or principals have a spouse, registered domestic partner, child, parent, in-law or brother/sister, half-brother/half-sister, grandchild, grandparent, related to a Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)?
 Yes No (If yes, please complete the Disclosure of Relationship form on Page 2. If no, please print N/A on Page 2.)

I certify under penalty of perjury, that all of the information provided herein is current, complete, and accurate. I also understand that the Board will not take action on land-use approvals, contract approvals, land sales, leases or exchanges without the completed disclosure form.

Joshua D Tietjen
Signature

Joshua D Tietjen
Print Name

Area Manager
Title

4/2/24
Date

DISCLOSURE OF RELATIONSHIP

List any disclosures below:
(Mark N/A, if not applicable.)

NAME OF BUSINESS OWNER/PRINCIPAL	NAME OF COUNTY* EMPLOYEE/OFFICIAL AND JOB TITLE	RELATIONSHIP TO COUNTY* EMPLOYEE/OFFICIAL	COUNTY* EMPLOYEE'S/OFFICIAL'S DEPARTMENT

* County employee means Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District.

“Consanguinity” is a relationship by blood. “Affinity” is a relationship by marriage.

“To the second degree of consanguinity” applies to the candidate’s first and second degree of blood relatives as follows:

- Spouse – Registered Domestic Partners – Children – Parents – In-laws (first degree)
- Brothers/Sisters – Half-Brothers/Half-Sisters – Grandchildren – Grandparents – In-laws (second degree)

For County Use Only:

If any Disclosure of Relationship is noted above, please complete the following:

- Yes No Is the County employee(s) noted above involved in the contracting/selection process for this particular agenda item?
- Yes No Is the County employee(s) noted above involved in any way with the business in performance of the contract?

Notes/Comments:

Signature

Print Name
Authorized Department Representative

