

## The FTP File Format Requirements for NRUF Reporting

### 1.1 Form 'U1' FTP Data Record Format Requirements

#### Utilization Reporting Form (For Non-Rural Primary Carriers)

##### 1.1.1 Contact Information:

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	Modified	Character	1	Values: 'Y' if modifying previously submitted form; 'N' if new form.
3	Form Date	Date	8	Format: MMDDYYYY
4	Parent Company Name	Character	50	
5	Service Provider Name	Character	50	
6	Company Address	Character	50	
7	Address 2	Character	50	
8	City	Character	20	
9	State	Character	2	
10	Zip	Number	9	
11	Contact Name	Character	50	
12	Contact Tel #	Number	14	
13	Fax #	Number	14	
14	Email	Character	50	
15	Parent Company OCN	Character	4	The Parent Company OCN of the reporting carrier. Only one Parent Company OCN allowed.
16	Service Provider OCN	Character	4	The OCN of the reporting carrier. Only one OCN allowed.
17	SP Service Type	Number	2	01=CAP or CLEC 02=Incumbent Local Exchange Carrier (ILEC) 03=Interexchange Carrier (IXC) 04=Other Local (Shared-Tenant, Private Carriers) 05=Local Reseller 06=Other Mobile Service Provider 07=Paging and Messaging 08=Satellite Service Providers 09=SMR Dispatch 10=Wireless Data Service Provider 11=Wireless Telephony (Cellular, PCS, SMR) 12=Interconnected VoIP
18	SP FRN	Number	10	The 10 digit Federal Registration Number assigned to the carrier by the Federal Communications Commission (FCC) and used by entities on FCC Form 499-A.

**1.1.2 Utilization Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	NPA-NXX	Number	6	
3	X	Number	1	
4	Rate Center	Character	10	
5	Assigned	Number	4	
6	Intermed	Number	4	
7	Reserved	Number	4	
8	Aging	Number	4	
9	Admin	Number	4	
10	Available	Number	4	
11	Donated To Pool	Number	4	> 0 if the block was donated to the PA
12	Utilization	Number	3.2	
13	Notes	Character	250	

**File and Data details**

Record IDs should be unique sequential numbers for each record within the file excluding the beginning record/header.

Each field should be separated by a comma (,) and fields containing multiple word strings and/or commas (,) should be enclosed in double quotes ("). The separator comma (,) is required for all the fields, even fields that do not contain values or that are not provided.

Each file should have:

1. one beginning record/header that gives the count of total records in the file excluding the beginning record/header;
2. then one record containing *Contact Information*;
3. then one or more records containing the *Utilization Information*.

The following file naming convention should be used:

1. Service Provider OCN
2. Date of Transmission (Format: MMDDYYYY)
3. Form Name ('U1S')
4. File Extension ('DAT')

Each of the above values should be separated by a period ('.'). Characters should be in upper case only.

Example: 556Z.05302019.U1S.DAT corresponds to a Service Provider '556Z' transmitting form U1 on May 30, 2019.

FTP the completed form to NANPA at <ftp.nationalnanpa.com>.

**1.2 Form 'U2' FTP Data Record Format Requirements**  
**Utilization Reporting Form (For Rural Primary Carriers)**

**1.2.1 Contact Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	Modified	Character	1	Values: 'Y' if modifying previously submitted form; 'N' if new form.
3	Form Date	Date	8	Format: MMDDYYYY
4	Parent Company Name	Character	50	
5	Service Provider Name	Character	50	
6	Company Address	Character	50	
7	Address 2	Character	50	
8	City	Character	20	
9	State	Character	2	
10	Zip	Number	9	
11	Contact Name	Character	50	
12	Contact Tel #	Number	14	
13	Fax #	Number	14	
14	Email	Character	50	
15	Parent Company OCN(s)	Character	4	The Parent Company OCN of the reporting carrier. Only one Parent Company OCN allowed.
16	Service Provider OCN	Character	4	The OCN of the reporting carrier. Only one OCN allowed.
17	SP Service Type	Number	2	01=CAP or CLEC 02=Incumbent Local Exchange Carrier (ILEC) 03=Interexchange Carrier (IXC) 04=Other Local (Shared-Tenant, Private Carriers) 05=Local Reseller 06=Other Mobile Service Provider 07=Paging and Messaging 08=Satellite Service Providers 09=SMR Dispatch 10=Wireless Data Service Provider 11=Wireless Telephony (Cellular, PCS, SMR) 12=Interconnected VoIP
18	SP FRN	Number	10	The 10 digit Federal Registration Number assigned to the carrier by the Federal Communications Commission (FCC) and used by entities on FCC Form 499-A.

**1.2.2 Utilization Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	NPA-NXX	Number	6	
3	Rate Center	Character	10	
4	State	Character	2	
5	Assigned	Number	4	
6	Intermed	Number	4	
7	Reserved	Number	4	
8	Aging	Number	4	
9	Admin	Number	4	
10	Available	Number	4	
11	Donated To Pool	Number	4	Should be empty or 0
12	Utilization	Number	3.2	
13	Notes	Character	250	

**File and Data details**

Record IDs should be unique sequential numbers for each record within the file excluding the beginning record/header.

Each field should be separated by a comma (,) and fields containing multiple word strings and/or commas (,) should be enclosed in double quotes ("). The separator comma (,) is required for all the fields, even fields that do not contain values or that are not provided.

Each file should have:

1. one beginning record/header that gives the count of total records in the file excluding the beginning record/header;
2. then one record containing *Contact Information*;
3. then one or more records containing the *Utilization Information*.

The following file naming convention should be used:

1. Service Provider OCN
2. Date of Transmission (Format: MMDDYYYY)
3. Form Name ('U2S')
4. File Extension ('DAT')

Each of the above values should be separated by a period ('.'). Characters should be in upper case only.

Example: 556Z.05302019.U2S.DAT corresponds to a Service Provider '556Z' transmitting form U2 on May 30, 2019.

FTP the completed form to NANPA at <ftp.nationalnanpa.com>.

**1.3 Form 'U3' FTP Data Record Format Requirements**  
**Utilization Reporting Form (For Non-Rural Intermediate Carriers)**

**1.3.1 Contact Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	Modified	Character	1	Values: 'Y' if modifying previously submitted form; 'N' if new form.
3	Form Date	Date	8	Format: MMDDYYYY
4	Parent Company Name	Character	50	
5	Service Provider Name	Character	50	
6	Company Address	Character	50	
7	Address 2	Character	50	
8	City	Character	20	
9	State	Character	2	
10	Zip	Number	9	
11	Contact Name	Character	50	
12	Contact Tel #	Number	14	
13	Fax #	Number	14	
14	Email	Character	50	
15	Parent Company OCN(s)	Character	4	The Parent Company OCN of the reporting carrier. Only one Parent Company OCN allowed.
16	Service Provider OCN	Character	4	The OCN of the reporting carrier. Only one OCN allowed.
17	SP Service Type	Number	2	01=CAP or CLEC 02=Incumbent Local Exchange Carrier (ILEC) 03=Interexchange Carrier (IXC) 04=Other Local (Shared-Tenant, Private Carriers) 05=Local Reseller 06=Other Mobile Service Provider 07=Paging and Messaging 08=Satellite Service Providers 09=SMR Dispatch 10=Wireless Data Service Provider 11=Wireless Telephony (Cellular, PCS, SMR) 12=Interconnected VoIP
18	SP FRN	Number	10	The 10 digit Federal Registration Number assigned to the carrier by the Federal Communications Commission (FCC) and used by entities on FCC Form 499-A.

**1.3.2 Utilization Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	NPA-NXX	Number	6	
3	X	Number	1	
4	Rate Center	Character	10	
5	Assigned	Number	4	
6	Intermed	Number	4	
7	Reserved	Number	4	
8	Aging	Number	4	
9	Admin	Number	4	
10	Available	Number	4	
11	Quantity of Numbers Received	Number	4	
12	Utilization	Number	3.2	
13	Notes	Character	250	

**File and Data details**

Record IDs should be unique sequential numbers for each record within the file excluding the beginning record/header.

Each field should be separated by a comma (,) and fields containing multiple word strings and/or commas (,) should be enclosed in double quotes ("). The separator comma (,) is required for all the fields, even fields that do not contain values or that are not provided.

Each file should have:

1. one beginning record/header that gives the count of total records in the file excluding the beginning record/header;
2. then one record containing *Contact Information*;
3. then one or more records containing the *Utilization Information*.

The following file naming convention should be used:

1. Service Provider OCN
2. Date of Transmission (Format: MMDDYYYY)
3. Form Name ('U3S')
4. File Extension ('DAT')

Each of the above values should be separated by a period ('.'). Characters should be in upper case only.

Example: 556Z.05302019.U3S.DAT corresponds to a Service Provider '556Z' transmitting form U3 on May 30, 2019.

FTP the completed form to NANPA at <ftp.nationalnanpa.com>.

**1.4 Form 'U4' FTP Data Record Format Requirements**  
**Utilization Reporting Form (For Rural Intermediate Carriers)**

**1.4.1 Contact Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	Modified	Character	1	Values: 'Y' if modifying previously submitted form; 'N' if new form.
3	Form Date	Date	8	Format: MMDDYYYY
4	Parent Company Name	Character	50	
5	Service Provider Name	Character	50	
6	Company Address	Character	50	
7	Address 2	Character	50	
8	City	Character	20	
9	State	Character	2	
10	Zip	Number	9	
11	Contact Name	Character	50	
12	Contact Tel #	Number	14	
13	Fax #	Number	14	
14	Email	Character	50	
15	Parent Company OCN(s)	Character	4	The Parent Company OCN of the reporting carrier. Only one Parent Company OCN allowed.
16	Service Provider OCN	Character	4	The OCN of the reporting carrier. Only one OCN allowed.
17	SP Service Type	Number	2	01=CAP or CLEC 02=Incumbent Local Exchange Carrier (ILEC) 03=Interexchange Carrier (IXC) 04=Other Local (Shared-Tenant, Private Carriers) 05=Local Reseller 06=Other Mobile Service Provider 07=Paging and Messaging 08=Satellite Service Providers 09=SMR Dispatch 10=Wireless Data Service Provider 11=Wireless Telephony (Cellular, PCS, SMR) 12=Interconnected VoIP
18	SP FRN	Number	10	The 10 digit Federal Registration Number assigned to the carrier by the Federal Communications Commission (FCC) and used by entities on FCC Form 499-A.

**1.4.2 Utilization Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	NPA-NXX	Number	6	
3	Rate Center	Character	10	
4	State	Character	2	
5	Assigned	Number	4	
6	Intermed	Number	4	
7	Reserved	Number	4	
8	Aging	Number	4	
9	Admin	Number	4	
10	Available	Number	4	
11	Quantity of Numbers Received	Number	4	
12	Utilization	Number	3.2	
13	Notes	Character	250	

**File and Data details**

Record IDs should be unique sequential numbers for each record within the file excluding the beginning record/header.

Each field should be separated by a comma (,) and fields containing multiple word strings and/or commas (,) should be enclosed in double quotes ("). The separator comma (,) is required for all the fields, even fields that do not contain values or that are not provided.

Each file should have:

1. one beginning record/header that gives the count of total records in the file excluding the beginning record/header;
2. then one record containing *Contact Information*;
3. then one or more records containing the *Utilization Information*.

The following file naming convention should be used:

1. Service Provider OCN
2. Date of Transmission (Format: MMDDYYYY)
3. Form Name ('U4S')
4. File Extension ('DAT')

Each of the above values should be separated by a period ('.'). Characters should be in upper case only.

Example: 556Z.05302019.U4S.DAT corresponds to a Service Provider '556Z' transmitting form U4 on May 30, 2019.

FTP the completed form to NANPA at <ftp.nationalnanpa.com>.



**1.5 Form 'F1A' FTP Data Record Format Requirements**  
**Forecast Reporting Form (For Pooling Carriers - Initial Thousand Blocks)**  
**(Initial 1K Blocks per Rate Center, Per Year)**

**1.5.1 Contact Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	Modified	Character	1	Values: 'Y' if modifying previously submitted form; 'N' if new form.
3	Form Date	Date	8	Format: MMDDYYYY
4	Parent Company Name	Character	50	
5	Service Provider Name	Character	50	
6	Company Address	Character	50	
7	Address 2	Character	50	
8	City	Character	20	
9	State	Character	2	
10	Zip	Number	9	
11	Contact Name	Character	50	
12	Contact Tel #	Number	14	
13	Fax #	Number	14	
14	Email	Character	50	
15	Parent Company OCN(s)	Character	4	The Parent Company OCN of the reporting carrier. Only one Parent Company OCN allowed.
16	Service Provider OCN	Character	4	The OCN of the reporting carrier. Only one OCN allowed.
17	SP Service Type	Number	2	01=CAP or CLEC 02=Incumbent Local Exchange Carrier (ILEC) 03=Interexchange Carrier (IXC) 04=Other Local (Shared-Tenant, Private Carriers) 05=Local Reseller 06=Other Mobile Service Provider 07=Paging and Messaging 08=Satellite Service Providers 09=SMR Dispatch 10=Wireless Data Service Provider 11=Wireless Telephony (Cellular, PCS, SMR) 12=Interconnected VoIP
18	SP FRN	Number	10	The 10 digit Federal Registration Number assigned to the carrier by the Federal Communications Commission (FCC) and used by entities on FCC Form 499-A.

**1.5.2 Forecast Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	NPA	Number	3	
3	LERG Rate Center	Character	10	
4	State	Character	2	
5	Year 1	Number	4	
6	Year 2	Number	4	
7	Year 3	Number	4	
8	Year 4	Number	4	
9	Year 5	Number	4	
10	Total 1K Blocks	Number	5	

**File and Data details**

Record IDs should be unique sequential numbers for each record within the file excluding the beginning record/header.

Each field should be separated by a comma (,) and fields containing multiple word strings and/or commas (,) should be enclosed in double quotes ("). The separator comma (,) is required for all the fields, even fields that do not contain values or that are not provided.

Each file should have:

1. one beginning record/header that gives the count of total records in the file excluding the beginning record/header;
2. then one record containing *Contact Information*;
3. then one or more records containing the *Forecast Information*.

The following file naming convention should be used:

1. Service Provider OCN
2. Date of Transmission (Format: MMDDYYYY)
3. Form Name ('F1AS')
4. File Extension ('DAT')

Each of the above values should be separated by a period ('.'). Characters should be in upper case only.

Example: 556Z.05302019.F1AS.DAT corresponds to a Service Provider '556Z' transmitting form F1A on May 30, 2019.

FTP the completed form to NANPA at <ftp.nationalnanpa.com>.

**1.6 Form 'F1B' FTP Data Record Format Requirements**  
**Forecast Reporting Form (For Pooling Carriers - Growth Thousand Blocks)**  
**(Growth 1K Blocks per Rate Center, Per Year)**

**1.6.1 Contact Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	Modified	Character	1	Values: 'Y' if modifying previously submitted form; 'N' if new form.
3	Form Date	Date	8	Format: MMDDYYYY
4	Parent Company Name	Character	50	
5	Service Provider Name	Character	50	
6	Company Address	Character	50	
7	Address 2	Character	50	
8	City	Character	20	
9	State	Character	2	
10	Zip	Number	9	
11	Contact Name	Character	50	
12	Contact Tel #	Number	14	
13	Fax #	Number	14	
14	Email	Character	50	
15	Parent Company OCN(s)	Character	4	The Parent Company OCN of the reporting carrier. Only one Parent Company OCN allowed.
16	Service Provider OCN	Character	4	The OCN of the reporting carrier. Only one OCN allowed.
17	SP Service Type	Number	2	01=CAP or CLEC 02=Incumbent Local Exchange Carrier (ILEC) 03=Interexchange Carrier (IXC) 04=Other Local (Shared-Tenant, Private Carriers) 05=Local Reseller 06=Other Mobile Service Provider 07=Paging and Messaging 08=Satellite Service Providers 09=SMR Dispatch 10=Wireless Data Service Provider 11=Wireless Telephony (Cellular, PCS, SMR) 12=Interconnected VoIP
18	SP FRN	Number	10	The 10 digit Federal Registration Number assigned to the carrier by the Federal Communications Commission (FCC) and used by entities on FCC Form 499-A.

**1.6.2 Forecast Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	NPA	Number	3	
3	LERG Rate Center	Character	10	
4	State	Character	2	
5	Year 1	Number	4	
6	Year 2	Number	4	
7	Year 3	Number	4	
8	Year 4	Number	4	
9	Year 5	Number	4	
10	Total 1K Blocks	Number	5	

**File and Data details**

Record IDs should be unique sequential numbers for each record within the file excluding the beginning record/header.

Each field should be separated by a comma (,) and fields containing multiple word strings and/or commas (,) should be enclosed in double quotes ("). The separator comma (,) is required for all the fields, even fields that do not contain values or that are not provided.

Each file should have:

1. one beginning record/header that gives the count of total records in the file excluding the beginning record/header;
2. then one record containing *Contact Information*;
3. then one or more records containing the *Forecast Information*.

The following file naming convention should be used:

1. Service Provider OCN
2. Date of Transmission (Format: MMDDYYYY)
3. Form Name ('F1BS')
4. File Extension ('DAT')

Each of the above values should be separated by a period ('.'). Characters should be in upper case only.

Example: 556Z.05302019.F1BS.DAT corresponds to a Service Provider '556Z' transmitting form F1B on May 30, 2019.

FTP the completed form to NANPA at <ftp.nationalnanpa.com>.

**1.7 Form 'F2A' FTP Data Record Format Requirements**  
**Forecast Reporting Form (For Non-Pooling Carriers In Pooling Areas - Initial Codes)**  
**(Initial NXXs per Rate Center, Per Year)**

**1.7.1 Contact Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	Modified	Character	1	Values: 'Y' if modifying previously submitted form; 'N' if new form.
3	Form Date	Date	8	Format: MMDDYYYY
4	Parent Company Name	Character	50	
5	Service Provider Name	Character	50	
6	Company Address	Character	50	
7	Address 2	Character	50	
8	City	Character	20	
9	State	Character	2	
10	Zip	Number	9	
11	Contact Name	Character	50	
12	Contact Tel #	Number	14	
13	Fax #	Number	14	
14	Email	Character	50	
15	Parent Company OCN(s)	Character	4	The Parent Company OCN of the reporting carrier. Only one Parent Company OCN allowed.
16	Service Provider OCN	Character	4	The OCN of the reporting carrier. Only one OCN allowed.
17	SP Service Type	Number	2	01=CAP or CLEC 02=Incumbent Local Exchange Carrier (ILEC) 03=Interexchange Carrier (IXC) 04=Other Local (Shared-Tenant, Private Carriers) 05=Local Reseller 06=Other Mobile Service Provider 07=Paging and Messaging 08=Satellite Service Providers 09=SMR Dispatch 10=Wireless Data Service Provider 11=Wireless Telephony (Cellular, PCS, SMR) 12=Interconnected VoIP
18	SP FRN	Number	10	The 10 digit Federal Registration Number assigned to the carrier by the Federal Communications Commission (FCC) and used by entities on FCC Form 499-A.

**1.7.2 Forecast Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	NPA	Number	3	
3	LERG Rate Center	Character	10	
4	State	Character	2	
5	Year 1	Number	3	
6	Year 2	Number	3	
7	Year 3	Number	3	
8	Year 4	Number	3	
9	Year 5	Number	3	
10	Total NXX(s)	Number	4	

**File and Data details**

Record IDs should be unique sequential numbers for each record within the file excluding the beginning record/header.

Each field should be separated by a comma (,) and fields containing multiple word strings and/or commas (,) should be enclosed in double quotes ("). The separator comma (,) is required for all the fields, even fields that do not contain values or that are not provided.

Each file should have:

1. one beginning record/header that gives the count of total records in the file excluding the beginning record/header;
2. then one record containing *Contact Information*;
3. then one or more records containing the *Forecast Information*.

The following file naming convention should be used:

1. Service Provider OCN
2. Date of Transmission (Format: MMDDYYYY)
3. Form Name ('F2AS')
4. File Extension ('DAT')

Each of the above values should be separated by a period (.). Characters should be in upper case only.

Example: 556Z.05302019.F2AS.DAT corresponds to a Service Provider '556Z' transmitting form F2A on May 30, 2019.

FTP the completed form to NANPA at <ftp.nationalnanpa.com>.

**1.8 Form 'F2B' FTP Data Record Format Requirements**  
**Forecast Reporting Form (For Non-Pooling Carriers In Pooling Areas - Growth Codes)**  
**(Growth NXXs per Rate Center, Per Year)**

**1.8.1 Contact Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	Modified	Character	1	Values: 'Y' if modifying previously submitted form; 'N' if new form.
3	Form Date	Date	8	Format: MMDDYYYY
4	Parent Company Name	Character	50	
5	Service Provider Name	Character	50	
6	Company Address	Character	50	
7	Address 2	Character	50	
8	City	Character	20	
9	State	Character	2	
10	Zip	Number	9	
11	Contact Name	Character	50	
12	Contact Tel #	Number	14	
13	Fax #	Number	14	
14	Email	Character	50	
15	Parent Company OCN(s)	Character	4	The Parent Company OCN of the reporting carrier. Only one Parent Company OCN allowed.
16	Service Provider OCN	Character	4	The OCN of the reporting carrier. Only one OCN allowed.
17	SP Service Type	Number	2	01=CAP or CLEC 02=Incumbent Local Exchange Carrier (ILEC) 03=Interexchange Carrier (IXC) 04=Other Local (Shared-Tenant, Private Carriers) 05=Local Reseller 06=Other Mobile Service Provider 07=Paging and Messaging 08=Satellite Service Providers 09=SMR Dispatch 10=Wireless Data Service Provider 11=Wireless Telephony (Cellular, PCS, SMR) 12=Interconnected VoIP
18	SP FRN	Number	10	The 10 digit Federal Registration Number assigned to the carrier by the Federal Communications Commission (FCC) and used by entities on FCC Form 499-A.

**1.8.2 Forecast Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	NPA	Number	3	
3	LERG Rate Center	Character	10	
4	State	Character	2	
5	Year 1	Number	3	
6	Year 2	Number	3	
7	Year 3	Number	3	
8	Year 4	Number	3	
9	Year 5	Number	3	
10	Total NXX(s)	Number	4	

**File and Data details**

Record IDs should be unique sequential numbers for each record within the file excluding the beginning record/header.

Each field should be separated by a comma (,) and fields containing multiple word strings and/or commas (,) should be enclosed in double quotes ("). The separator comma (,) is required for all the fields, even fields that do not contain values or that are not provided.

Each file should have:

1. one beginning record/header that gives the count of total records in the file excluding the beginning record/header;
2. then one record containing *Contact Information*;
3. then one or more records containing the *Forecast Information*.

The following file naming convention should be used:

1. Service Provider OCN
2. Date of Transmission (Format: MMDDYYYY)
3. Form Name ('F2BS')
4. File Extension ('DAT')

Each of the above values should be separated by a period ('.'). Characters should be in upper case only.

Example: 556Z.05302019.F2BS.DAT corresponds to a Service Provider '556Z' transmitting form F2B on May 30, 2019.

FTP the completed form to NANPA at <ftp.nationalnanpa.com>.



**1.9 Form 'F3A' FTP Data Record Format Requirements**  
**Forecast Reporting Form (For Carriers In Non-Pooling Areas - Initial Codes)**  
**(Initial NXX(s) per NPA, Per Year)**

**1.9.1 Contact Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	Modified	Character	1	Values: 'Y' if modifying previously submitted form; 'N' if new form.
3	Form Date	Date	8	Format: MMDDYYYY
4	Parent Company Name	Character	50	
5	Service Provider Name	Character	50	
6	Company Address	Character	50	
7	Address 2	Character	50	
8	City	Character	20	
9	State	Character	2	
10	Zip	Number	9	
11	Contact Name	Character	50	
12	Contact Tel #	Number	14	
13	Fax #	Number	14	
14	Email	Character	50	
15	Parent Company OCN(s)	Character	4	The Parent Company OCN of the reporting carrier. Only one Parent Company OCN allowed.
16	Service Provider OCN	Character	4	The OCN of the reporting carrier. Only one OCN allowed.
17	SP Service Type	Number	2	01=CAP or CLEC 02=Incumbent Local Exchange Carrier (ILEC) 03=Interexchange Carrier (IXC) 04=Other Local (Shared-Tenant, Private Carriers) 05=Local Reseller 06=Other Mobile Service Provider 07=Paging and Messaging 08=Satellite Service Providers 09=SMR Dispatch 10=Wireless Data Service Provider 11=Wireless Telephony (Cellular, PCS, SMR) 12=Interconnected VoIP
18	SP FRN	Number	10	The 10 digit Federal Registration Number assigned to the carrier by the Federal Communications Commission (FCC) and used by entities on FCC Form 499-A.

**1.9.2 Forecast Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	NPA	Number	3	
3	State	Character	2	
4	Year 1	Number	3	
5	Year 2	Number	3	
6	Year 3	Number	3	
7	Year 4	Number	3	
8	Year 5	Number	3	
9	Total NXX(s)	Number	4	

**File and Data details**

Record IDs should be unique sequential numbers for each record within the file excluding the beginning record/header.

Each field should be separated by a comma (,) and fields containing multiple word strings and/or commas (,) should be enclosed in double quotes ("). The separator comma (,) is required for all the fields, even fields that do not contain values or that are not provided.

Each file should have:

1. one beginning record/header that gives the count of total records in the file excluding the beginning record/header;
2. then one record containing *Contact Information*;
3. then one or more records containing the *Forecast Information*.

The following file naming convention should be used:

1. Service Provider OCN
2. Date of Transmission (Format: MMDDYYYY)
3. Form Name ('F3AS')
4. File Extension ('DAT')

Each of the above values should be separated by a period ('.'). Characters should be in upper case only.

Example: 556Z.05302019.F3AS.DAT corresponds to a Service Provider '556Z' transmitting form F3A on May 30, 2019.

FTP the completed form to NANPA at <ftp.nationalnanpa.com>.

**1.10 Form 'F3B' FTP Data Record Format Requirements**  
**Forecast Reporting Form (For Carriers In Non-Pooling Areas - Growth Codes)**  
**(Growth NXX(s) per NPA, Per Year)**

**1.10.1 Contact Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	Modified	Character	1	Values: 'Y' if modifying previously submitted form; 'N' if new form.
3	Form Date	Date	8	Format: MMDDYYYY
4	Parent Company Name	Character	50	
5	Service Provider Name	Character	50	
6	Company Address	Character	50	
7	Address 2	Character	50	
8	City	Character	20	
9	State	Character	2	
10	Zip	Number	9	
11	Contact Name	Character	50	
12	Contact Tel #	Number	14	
13	Fax #	Number	14	
14	Email	Character	50	
15	Parent Company OCN(s)	Character	4	The Parent Company OCN of the reporting carrier. Only one Parent Company OCN allowed.
16	Service Provider OCN	Character	4	The OCN of the reporting carrier. Only one OCN allowed.
17	SP Service Type	Number	2	01=CAP or CLEC 02=Incumbent Local Exchange Carrier (ILEC) 03=Interexchange Carrier (IXC) 04=Other Local (Shared-Tenant, Private Carriers) 05=Local Reseller 06=Other Mobile Service Provider 07=Paging and Messaging 08=Satellite Service Providers 09=SMR Dispatch 10=Wireless Data Service Provider 11=Wireless Telephony (Cellular, PCS, SMR) 12=Interconnected VoIP
18	SP FRN	Number	10	The 10 digit Federal Registration Number assigned to the carrier by the Federal Communications Commission (FCC) and used by entities on FCC Form 499-A.

**1.10.2 Forecast Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	NPA	Number	3	
3	State	Character	2	
4	Year 1	Number	3	
5	Year 2	Number	3	
6	Year 3	Number	3	
7	Year 4	Number	3	
8	Year 5	Number	3	
9	Total NXX(s)	Number	4	

**File and Data details**

Record IDs should be unique sequential numbers for each record within the file excluding the beginning record/header.

Each field should be separated by a comma (,) and fields containing multiple word strings and/or commas (,) should be enclosed in double quotes ("). The separator comma (,) is required for all the fields, even fields that do not contain values or that are not provided.

Each file should have:

1. one beginning record/header that gives the count of total records in the file excluding the beginning record/header;
2. then one record containing *Contact Information*;
3. then one or more records containing the *Forecast Information*.

The following file naming convention should be used:

1. Service Provider OCN
2. Date of Transmission (Format: MMDDYYYY)
3. Form Name ('F3BS')
4. File Extension ('DAT')

Each of the above values should be separated by a period ('.'). Characters should be in upper case only.

Example: 556Z.05302019.F3BS.DAT corresponds to a Service Provider '556Z' transmitting form F3B on May 30, 2019.

FTP the completed form to NANPA at <ftp.nationalnanpa.com>.

**1.11 Form 'RURAL' FTP Data Record Format Requirements**  
**Rural Certification Form**

**1.11.1 Contact and Rural Information:**

Field Number	Field Name	Type	Maximum Length	Description
1	Record ID	Number	5	Unique sequential number associated with a record within a file.
2	Parent Company Name	Character	50	
3	Service Provider Name	Character	50	
4	Company Address	Character	50	
5	Address 2	Character	50	
6	City	Character	20	
7	State	Character	2	
8	Zip	Number	9	
9	Contact Name	Character	50	
10	Contact Tel #	Number	14	
11	Fax #	Number	14	
12	Email	Character	50	
13	Parent Company OCN(s)	Character	4	The Parent Company OCN of the reporting carrier. Only one Parent Company OCN allowed.
14	Service Provider OCN	Character	4	The OCN of the reporting carrier. Only one OCN allowed.
15	SP Service Type	Number	2	01=CAP or CLEC 02=Incumbent Local Exchange Carrier (ILEC) 03=Interexchange Carrier (IXC) 04=Other Local (Shared-Tenant, Private Carriers) 05=Local Reseller 06=Other Mobile Service Provider 07=Paging and Messaging 08=Satellite Service Providers 09=SMR Dispatch 10=Wireless Data Service Provider 11=Wireless Telephony (Cellular, PCS, SMR) 12=Interconnected VoIP
16	SP FRN	Number	10	The 10 digit Federal Registration Number assigned to the carrier by the Federal Communications Commission (FCC) and used by entities on FCC Form 499-A.
17	Officer 1	Character	50	
18	Officer 2	Character	50	
19	Officer Telephone #	Number	14	

### **File and Data details**

Record IDs should be unique sequential numbers for each record within the file excluding the beginning record/header.

Each field should be separated by a comma (,) and fields containing multiple word strings and/or commas (,) should be enclosed in double quotes ("). The separator comma (,) is required for all the fields, even fields that do not contain values or that are not provided.

Each file should have:

1. Only one record containing Contact and Rural Information.

The following file naming convention should be used:

1. Service Provider OCN
2. Date of Transmission (Format: MMDDYYYY)
3. Form Name ('RURAL')
4. File Extension ('DAT')

Each of the above values should be separated by a period ('.'). Characters should be in upper case only.

Example: 556Z.05302019.RURAL.DAT corresponds to a Service Provider '556Z' transmitting form RURAL on May 30, 2019.

FTP the completed form to NANPA at <ftp.nationalnanpa.com>.