

IOWA UTILITIES BOARD

VCA-2008-0002

NOTICE OF SERVICE AREA REVISION, TRANSFER OR TERMINATION
OF CERTIFICATE OF FRANCHISE AUTHORITY PURSUANT TO 199 IAC 44Type of Modification (*Check one*):Certificate Number: C-0002**FILED WITH
Executive Secretary**

- Service Area Revision
 Transfer
 Termination

March 13, 2014**IOWA UTILITIES BOARD**Name of Applicant: MCC Iowa LLC d/b/a: MediacomAddress of Applicant's Principal Place of Business: One Mediacom WayCity: Mediacom Park State: NY Zip: 10918

Contact information for person responsible for this notice:

Name: Jenna Comizio GuarinoAddress: One Mediacom WayMediacom Park, NY 10918E-mail address: jcomizio@mediacomcc.comPhone: 845-419-6372**For Service Area Revision:****Effective Date of Revision: 05/02/2014**

Describe the modified service area and municipalities to be served by Applicant, including unincorporated areas, in a manner complying with 199 IAC 44.3(3)"d." Multiple service areas may be described. Applicants certified by the Board as local exchange carriers pursuant to Iowa Code Section 476.29 may choose to refer to descriptions (including maps) of service areas on file with the Board. Description(s) may be submitted as an attachment if more space is needed.

For Lynville, IA as now in existence and as may be annexed in the future.

For Transfer:

Name of Successor: _____ d/b/a: _____

Address of Successor's Principal Place of Business: _____

City: _____ State: _____ Zip: _____

Names and titles of Successor's principal executive officers with direct authority over cable and/or video operations:

Successor's Customer Service Contact Information:

Name: _____

Address: _____

Phone: _____

If service area and municipalities to be served by Successor, including unincorporated areas, differ from the current certificate holder, describe here in a manner complying with 199 IAC 44.3(3)"d." Multiple service areas may be described. Description(s) may be submitted as an attachment if more space is needed.

Effective date of transfer, if later than 14 business days after date notice is filed: _____

For Termination (includes instances where a certificate holder ceases the operation or construction of a service network):

Effective date of Termination: _____