

Field Name	Field Description	Data Description	Required Status	Conditional Requirements	Type	Length	Format	Default Value								
transactionType	Transaction Type	<p>There are a number of transactions you can perform with NLAD. Every transaction must have its type declared in this field. For batch transactions, each row of the batch file is a single transaction, meaning each row must have the transaction type entered.</p> <p>Full list of available transactions:</p> <p>enroll - Used to enroll a Lifeline eligible subscriber.</p> <p>transfer - Used to transfer the Lifeline benefits from another carrier.</p> <p>update - Used to update/change a subscriber's information.</p> <p>deEnrollDeceased - Used to de-enroll a Lifeline subscriber who has deceased.</p> <p>deEnrollLeaving - Used to de-enroll a Lifeline subscriber who is opting out of the program, or is no longer eligible for benefits.</p> <p>deEnrollFailedRecertification - Used to de-enroll a Lifeline subscriber who has not filed their annual recertification.</p> <p>deEnrollNonUsage - Used to de-enroll a Lifeline subscriber who has not used their benefits for 60 days.</p>	Required		Alphabetic											
phoneNumberInNlad	Subscriber's Current Telephone Number	<p>Subscriber's current phone number in NLAD, associated with their Lifeline benefits. This field is required when de-enrolling a subscriber. This may be the same number you enter in the phoneNumber field.</p> <p>When performing an update transaction that updates the phone number, put the current phone number in this field and the new phone number in the phoneNumber field.</p>	Conditional	Required if transactionType = update deEnrollDeceased deEnrollLeaving deEnrollFailedRecertification deEnrollNonUsage	Numeric	10	xxxxxxxx									
transactionEffectiveDate	Transaction Effective Date	The transaction effective date is the date the transaction is effective with the ETC. For example, if you sign up a subscriber on 12/10/2013, but submit the enroll transaction for that subscriber on 12/11/2013, the transaction <i>effective</i> date to be entered in this field is 12/10/2013.	Required		Date		mm/dd/yyyy									
Sac	Study Area Code	This is the 6-digit number associated with the ETC providing the Lifeline benefit to the subscriber. Every transaction must include the appropriate SAC number for that subscriber.	Required		Numeric	6	xxxxxx									
lastName	Last Name	<p>Full, last name of subscriber. Minimum of two alphabetic characters.</p> <p>Accepts the SPACE character, and these special characters:</p> <table border="1"> <thead> <tr> <th>Name</th> <th>Character</th> </tr> </thead> <tbody> <tr> <td>Apostrophe</td> <td>'</td> </tr> <tr> <td>Accent Grave</td> <td>`</td> </tr> <tr> <td>Dash</td> <td>-</td> </tr> </tbody> </table>	Name	Character	Apostrophe	'	Accent Grave	`	Dash	-	Required		Alphabetic	50		
Name	Character															
Apostrophe	'															
Accent Grave	`															
Dash	-															
firstName	First Name	<p>First name of subscriber.</p> <p>Accepts the SPACE character, and these special characters:</p> <table border="1"> <thead> <tr> <th>Name</th> <th>Character</th> </tr> </thead> <tbody> <tr> <td>Apostrophe</td> <td>'</td> </tr> </tbody> </table>	Name	Character	Apostrophe	'	Required		Alphabetic	50						
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		Accent Grave Dash																
middleName	Middle Name	Middle name of subscriber. Accepts the SPACE character, and these special characters: <table border="1"> <thead> <tr> <th>Name</th> <th>Character</th> </tr> </thead> <tbody> <tr> <td>Apostrophe</td> <td>'</td> </tr> <tr> <td>Accent Grave</td> <td>`</td> </tr> <tr> <td>Dash</td> <td>-</td> </tr> <tr> <td>Period</td> <td>.</td> </tr> </tbody> </table>	Name	Character	Apostrophe	'	Accent Grave	`	Dash	-	Period	.	Optional		Alphabetic	50		
Name	Character																	
Apostrophe	'																	
Accent Grave	`																	
Dash	-																	
Period	.																	
phoneNumber	Telephone Number	Telephone number of the Lifeline-eligible subscriber. This can be the new number you are assigning to the subscriber. If the subscriber is already enrolled in NLAD, you can put their current phone number here, in which case it will be the same as phoneNumberInNlad. No two subscribers can have the same phone number.	Required		Numeric	10	xxxxxxxx											
subscriberId	Subscriber ID	System-generated unique ID field.	Conditional	This field is required for deenroll and update transactions if service type = Broadband and the subscriber does not have a phone number. In all other cases the field is optional.	Alphanumeric	9												
last4ssn	Last Four Digits of Social Security Number	Last four digits of the subscriber's social security number.	Conditional	last4ssn or tribalId must be provided.	Numeric	4	xxxx											
tribalId	Tribal Identification Number	The Tribal identification number or Tribal enrollment number of the subscriber. ETCs that have collected partial Tribal IDs may submit them so long as they have at least two characters. This field accepts some special characters, including (but not limited to) the dash character (-).	Conditional	last4ssn or tribalId must be provided.	Alphanumeric	20												
dob	Date of Birth	Subscriber's date of birth.	Required		Date		mm/dd/yyyy											
includeSubscriberId	Include Subscriber ID	Requesting for the Subscriber ID to be displayed upon successful enroll or transfer transactions	Optional	When this field contains a "1" on Enroll or Transfer transactions, the Subscriber ID will be returned.	Bit	1	0 = no / 1 = yes											
iehFlag	Independent Economic Household Flag	The Independent Economic Household (IEH) Flag indicates the subscriber is an independent economic entity sharing an address with another Lifeline subscriber. ETCs must collect and retain the IEH worksheet.	Optional		Bit	1	0 = no / 1 = yes	default=0										
iehCertificationDate	IEH Date of Certification	Enter the date IEH certification was performed for the subscriber.	Conditional	required if iehFlag = 1	Date		mm/dd/yyyy											
iehRecertificationDate	IEH Date of Recertification	Enter the date IEH certification for the subscriber was recertified.	Optional		Date		mm/dd/yyyy											
primaryAddress1	Street Address	Subscriber's street address.	Required		Alphanumeric	50												
primaryAddress2	Secondary Address	Subscriber's secondary address.	Optional		Alphanumeric	50												
primaryCity	City	Subscriber's city of residence.	Required		Alphabetic	50												
primaryState	State	Subscriber's state of residence.	Required		Alphabetic	2												
primaryZipCode	ZIP	Subscriber's ZIP code of residence. Accepts a dash character (-).	Required		Numeric	10	xxxxx or xxxxx-											
primaryUrbanizationCode	Urbanization Code	This field is used only for Puerto Rico addresses that have an urbanization	Optional		Alphabetic	50												

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		code.						
primaryPermanentAddressFlag	Temporary Address Flag	The temporary address flag indicates that the primary address entered is a <i>temporary</i> location. A value of "0" indicates that the address is a <i>permanent</i> location. Note: the field "primaryPermanentAddressFlag" is the Temporary Address Flag field.	Optional		Bit	1	0 = permanent / 1 = temporary	default = 0
primaryTribalFlag	Tribal Address Flag	The primary Tribal flag indicates that the subscriber's address is in Tribal lands and is not registered with USPS address matching service (AMS).	Optional		Bit	1	0 = no / 1 = yes	default = 0
primaryRuralFlag	Non-Deliverable Rural Address Flag	The primary rural flag indicates that the subscriber's primary address is in a rural area, and is not registered with AMS, nor able to receive postal delivery.	Optional		Bit	1	0 = no / 1 = yes	default = 0
mailingAddress1	Mailing Street Address	Subscriber's mailing street address.	Optional		Alphanumeric	50		
mailingAddress2	Mailing Secondary Address	Subscriber's secondary mailing address.	Optional		Alphanumeric	50		
mailingCity	Mailing City	Subscriber's mailing city.	Optional		Alphabetic	50		
mailingState	Mailing State	Subscriber's mailing state.	Optional		Alphabetic	2		
mailingUrbanizationcode	Mailing Urbanization Code	This field is used only for Puerto Rico addresses that have an urbanization code.	Optional		Alphabetic	50		
mailingZipCode	Mailing ZIP	Subscriber's mailing ZIP code. Accepts a dash character (-).	Optional		Numeric	10	xxxxx or xxxxx-xxxx	
serviceInitializationDate	Service Initiation Date	Date that the service provider determined that the subscriber was eligible for Lifeline service.	Required		Date		mm/dd/yyyy	
serviceReverificationDate	Date of Reverification	This is the date the subscriber's Lifeline eligibility was reverified.	Optional		Date		mm/dd/yyyy	
eligibilityCode	Eligibility Program	The program code under which the subscriber is eligible for Lifeline benefits. Acceptable values are: E1 E2 E3 E4 E8 E9 E10 E11 E13 E14 E15	Required		Alphanumeric	3		

Field Name	Field Description	Data Description	Required Status	Conditional Requirements	Type	Length	Format	Default Value														
		More information about program codes can be found here: http://usac.org/res/documents/li/pdf/nlad/Handout_Enrollment-Eligibility-Codes.pdf																				
bqpLastName	BQP Last Name	Last name of the benefit-qualifying person (BQP).	Conditional	Required if any BQP field is provided (bqpFirstName, bqpMiddleName, bqpDob, bqpLast4ssn, or bqpTribalId).	Alphabetic	50																
bqpFirstName	BQP First Name	First name of the BQP.	Optional		Alphabetic	50																
bqpMiddleName	BQP Middle Name	Middle name of the BQP.	Optional		Alphabetic	50																
bqpDob	BQP Date of Birth	Date of birth of the BQP.	Optional		Date		mm/dd/yyyy															
bqpLast4ssn	BQP Last Four Digits of Social Security Number	Last four digits of the BQP's social security number.	Optional		Numeric	4	xxxx															
bqpTribalId	BQP Tribal Identification Number	Tribal identification number of the BQP.	Optional		Alphanumeric	20																
linkUpServiceDate	Link Up Date of service	The date Link Up service started.	Optional		Date		mm/dd/yyyy															
lifelineTribalBenefitFlag	Lifeline Tribal Benefit Flag	ETCs may use this flag to claim Lifeline Tribal support for a qualified subscriber to whom the ETC is offering Tribal rates. Note: this field is not related to primaryTribalFlag.	Required		Bit	1	0 = no / 1 = yes															
acpFlag	Address Confidentiality Program Flag	This field is inactive; any values entered into this field will be changed to null.	Optional		Bit	1																
etcGeneralUse	ETC General Use	This field is for general ETC use. An ETC may populate this field with any value, and it will be returned along with transaction error messages. For example, an ETC could enter a unique identifier in this field that will allow them to automate the process of looking up a subscriber in their own database when a transaction fails. This field accepts alphanumeric characters, the SPACE character, and these special characters: <table border="1" data-bbox="842 1306 1659 1689"> <thead> <tr> <th>Name</th> <th>Character</th> </tr> </thead> <tbody> <tr> <td>Dash</td> <td>-</td> </tr> <tr> <td>Underscore</td> <td>_</td> </tr> <tr> <td>Colon</td> <td>:</td> </tr> <tr> <td>Pound</td> <td>#</td> </tr> <tr> <td>At Sign</td> <td>@</td> </tr> <tr> <td>Period</td> <td>.</td> </tr> </tbody> </table>	Name	Character	Dash	-	Underscore	_	Colon	:	Pound	#	At Sign	@	Period	.	Optional		Alphanumeric	50		
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Dash	-																					
Underscore	_																					
Colon	:																					
Pound	#																					
At Sign	@																					
Period	.																					
tpivFlag	TPIV Flag	This field is inactive; any values entered into this field will be changed to "0". This field is still required as a column in the heading row of a batch file.	Optional		Alphanumeric	3	xxx	default = 0														
serviceType	Service Type	Subscriber's service type must be selected. Acceptable values are: voice, broadband, bundledVoice, bundledBroadband, bundledVoiceBroadband	Required		Alphabetic																	