



SECTION 1: MEMBER APPLICATION (RESIDENTIAL)

Date: _____ Home Number: _____

Name: _____

Social Security Number: _____ Driver's License #: _____ State: _____

Mailing Address: _____ House type/color: _____

Street Address: _____

(Randolph Communications cannot install telephone service without a valid street address)

City: _____ State: _____ Zip _____ County: _____

Employer: _____

Have you or your spouse (Other) had telephone service with us before? Yes ___ No ___

If yes, previous telephone number: _____ Date disconnected: _____

Has there been service at this address before? Yes ___ No ___

Do jacks need to be installed? Yes ___ No ___ If yes, how many: _____

List in Telephone Directory as: _____

Telephone Number: Published Non-Published (\$1.50/month)

Directory Requested: ___ Yes ___ No

The Applicant will grant to Randolph Communications (RC) a right-of-way easement to construct, operate and maintain a telephone line or system on the land described above and in or upon all streets, roads or driveways abutting said land. In this application, the undersigned agrees to the rules and regulations of the Cooperative as set forth in the exchange tariff, and to any general changes in rules or rate for the service furnished under this application. This application becomes a contract when accepted by the Cooperative. The Corporation's By-laws are available upon request. I authorize Randolph Communications to conduct a credit check to determine my credit worthiness and ability to pay for services ordered. If my credit rating is found to be unsatisfactory, a security deposit will be required. Failure to establish credit worthiness will result in the applicant being required to post a security deposit. If applicant does not want to disclose their social security number they can furnish three credit references. **There is an \$90.00 set-up fee, which we will bill on your first telephone bill.** Any additional work requested or required beyond the outside protector will result in additional charges (i.e. installation of a new telephone jack). There is a \$99 installation fee for internet and \$199 for TV service, which may be waived by meeting certain credit qualifications. To avoid the up-front installation fees applicant can choose to sign the 36-month commitment. If a 36-month commitment is not desired then the applicant is required to pay the installation fees up front as well as any deposits that may be required. This covers equipment and installation to one computer. Connections to additional computers, wired or wireless, will incur additional fees. Home Wi-Fi will be an additional \$4.99/mo or \$8.99/mo based on structure of home. If more adapters are needed then additional fee will incur. Please note that RC bills one month in advance for all services except toll and one-time purchases, such as computer services. Your first bill will include that one month in advance and any days between when the service was installed and when billing is run. The applicant also understands that a \$10 membership fee is due at the time the order is placed.

If at any point RC determines there is a health or service hazard that would prohibit service or equipment installation or repair, and/or, is a result of repeat equipment failure that may/may not be as a result of negligence of the customer, RC has the discretion to remove leased equipment, discontinue service, or discontinue upgrading equipment and services at customer home or business, pending Supervisor approval. Should a customer have inside wire maintenance in a bundle, then the inside wire maintenance would become void within the bundle. I acknowledge I have read and am in agreement with the RC policies that can be found at www.rtmccoop.com.

Authority to Perform Credit Check: Yes ___ No ___

Signature: _____ Date: _____

Secondary Signature to provide full account access: _____

RC Witness: _____

For Office Use Only

Telephone Number: _____

Member Number: _____

Security Deposit: _____ Date Paid: _____

Acct #: _____ Directory _____

Rev. 11.7.17

Payment Options

SmartHub (Online Bill Pay)
Automatic Draft
Credit Card – Visa, MasterCard or Discover
Mail
Drop Box
Drive Thru

SECTION 2: SECURITY (REQUIRED)

CPNI Password: _____ (main account password)

Security Questions (answer at least two of the questions below):

- 1. The model/make of your first car? _____
- 2. The 1st elementary school you attended? _____
- 3. The name of best friend in high school? _____
- 4. Your favorite holiday? _____
- 5. Your favorite animal? _____
- 6. Your school's mascot? _____

SECTION 3: Long Distance Authorization (REQUIRED)

(This is for your long distance provider.)

LETTER OF AUTHORIZATION

Billing Name & Address: _____

Yes, I understand that by signing and returning this form, I authorize RTTI to switch me to RTTI Long Distance for my **Intra-LATA** and **Inter-LATA** (calls made to destinations within and outside my Local Access and Transport Area – see current telephone directory for NC LATA map) and International calls. I understand that there may be a fee for making this change, but RTTI will compensate me for that fee. I designate RTTI to act as my agent to make this change. Please switch the telephone number(s), including Fax and Modem lines, listed below to RTTI Long Distance.

I acknowledge that RTTI is my long distance provider and understand that RTTI does not offer connections to third party long distance providers.

(____) ____ - ____ ; (____) ____ - ____ ; (____) ____ - ____ ; (____) ____ - ____

PIC FREEZE REQUEST / AUTHORIZATION

In order to be protected from any unauthorized switching of my **Intra-LATA** and **Inter-LATA** Carrier choice of RTTI, I hereby authorize RTTI to apply a "PIC FREEZE" to my Intra-LATA and Inter-LATA long distance account on these Telephone Numbers:

(____) ____ - ____ ; (____) ____ - ____ ; (____) ____ - ____ ; (____) ____ - ____

I understand that there is no charge for this service, and that I will be unable to change carriers unless my "PIC Freeze" is removed at my request by contacting my local telephone company's business office.

Signature(s) _____ **Date** _____

Randolph Communications **MEMBER RESIDENTIAL AGREEMENT**



SECTION 4:

BUNDLED SERVICES: *Select Option 1 or 2 below for a Bundled Service.*

Option 1 – DOUBLE PLAY BUNDLE: Phone & Internet (check one):

- \$79.95 (3 Mbps/768 Kbps) /10 cents a minute
- \$89.95 (Unlimited & 6 Mbps/768 Kbps)
- \$99.95 (Unlimited Voice & 8 x 2 Mbps)*
- \$117.95 (Unlimited Voice & 15x3 Mbps)*
- \$137.95 (Unlimited Voice & 25x5 Mbps)*
- \$177.95 (Unlimited Voice & 50x5 Mbps)*
- \$227.95 (Unlimited Voice & 100x10 Mbps)*

VoiceMail Preferences: # of rings before voicemail answers ____ I do not want voicemail with my bundle.

Option 2 – TRIPLE PLAY BUNDLES: Phone, Internet & MyTV (check one):

- \$155.90 (10 ¢/min, 3 Mbps/768 Kbps) & MyTV
- \$165.90 (Unlimited, 6 Mbps/768 Kbps & MyTV)
- \$175.90 (Unlimited Voice, 8x2 Mbps & MyTV)*
- \$193.90 (Unlimited Voice, 15x3 Mbps & MyTV)*
- \$213.90 (Unlimited Voice, 25x5 Mbps & MyTV)*
- \$253.90 (Unlimited Voice, 50x5 Mbps & MyTV)*
- \$303.90 (Unlimited Voice, 100x10 Mbps & MyTV)*

VoiceMail Preferences: # of rings before voicemail answers ____ I do not want voicemail with my bundle.

NON-BUNDLED SERVICES: *If a Bundle Option was not selected, then select one or more options below.*

BASIC PHONE (REQUIRED):

- Basic Phone (\$24.50) local and per minute long distance
- Voice Unlimited - \$58.00

Long Distance Plans: (if no plan selected then Basic rate applies)

- Economy Plus (\$3.95/mon. per line)
- Advanced Plan (\$4.95/mon. per line)
- Responsible Dialing Plan (\$5.95/mon. per line or \$9.95 per 2 lines)
(see page 6 for per minute rates)

INTERNET (check one): (For internet only, phone is required)

- \$49.95 - Premium (3 Mbps/768 Kbps)
- \$59.95 - Fast (6 Mbps/768 Kbps)
- \$69.95 - Ultra (8 Mbps/2 Mbps)*
- \$77.95 - Turbo (15x3 Mbps)*
- \$97.95 - Express (25x5 Mbps)*
- \$137.95 - Ultimate (50x5 Mbps)*
- \$177.95 - Extreme (100x10 Mbps)*

MyTV ONLY (package prices includes first 2 TV's):

- \$24.95 - Essential Pkg.
- \$75.95 - Classic Pkg. with Bundle (Phone & Internet)
- \$80.95 - Classic Pkg. (Also includes Essential & Music Channels)

ADD-ON'S:

- \$9.95 – Variety Pkg.
- \$5.95 – DVR Access
- \$4.95 – HD Access
- \$3.99 – Each add'l TV (3rd, 4th, etc.) x ____
- \$13.00 IP Access (required for non-internet subs.)

PREMIUMS: \$11.95 - STARZ/ENCORE \$10.95 - CINEMAX \$17.95 - Showtime/TMC \$18.95 - HBO \$49.50 - NFL RedZone

MAINTENANCE PLANS (select one if bundle not selected): \$2.95 Phone Only \$2.95 TV Only \$4.95 Phone & Internet \$6.95 Phone/Internet/TV

SECTION 5:

* Requires Fiber

INSTALLATION PLANS (select one):

- 36-Month Commitment – FREE Installation on Internet & MyTV
- \$99 – Internet Installation (no commitment)
- \$199 – MyTV Installation (no commitment)

REQUIRED: To aid with INTERNET installation, complete: (*Add'l charges may apply):

Email Address/Username: _____@rtmc.net
 Password: _____ (at least 8 characters including 1 number)
 Home #: _____
 Best Contact #: _____
 Network multiple computers? Y*/ N Jack near computer? Y/ N*

Print Name

Signature

Date



**Agreement Relating to Identification of Utility Equipment
and Other Equipment and Devices**

I, (We) _____, am the owner or the person in charge of the real estate located at

_____, and I(we) hereby agree that, prior to Randolph Communications commencing to perform work or services on my real estate, I (we) will meet with a representative of Randolph Communications for the purpose of locating and identifying any utility equipment, structures, or devices or any other equipment, structures, or devices in order to avoid Randolph Communications' accidental damage to or destruction of any equipment, structures, or devices. I (we) further agree that in the event damage or destruction to any equipment, structures, or devices occurs to any equipment, structures, or devices which I (we) have failed to locate and/or identify and which were not otherwise clearly apparent, that I (we) will hold Randolph Communications, its employees, and agents harmless and free from liability for any damage and/or destruction it may cause in that event.

I (We) agree to (check one of the following):

Schedule a meeting with a Randolph Communications representative so that I (we) can identify and locate any equipment, structures, or devices which Randolph Communications employees or agents should be made aware of before they commence performing work or services on my (our) premises.

Waive the meeting with Randolph Communications' representatives and my (our) opportunity to identify and locate any equipment, structures, or devices described above, and thereby hold Randolph Communications, its employees, and agents harmless and free of any liability resulting from damage or destruction to any equipment, structures, or devices which would not be apparent to a reasonable person.

Check any items that you believe exist on your property:

- Water lines Septic tank system LP or fuel lines
- Well Drain field lines Invisible pet fences
- Sprinkler systems Drain tiles or down spouts
- Sewer laterals Underground cable or wires

I (We) have read and understand the terms of this agreement.

Name of Property Owner or Authorized Representative:

Signature	Print	Date
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Randolph Communications Representative:

Signature	Print	Date
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Need Help Paying Your Phone Bill?

What is Lifeline?

Lifeline is a government benefit program supported by the Universal Service Fund that provides a discount on phone service for qualifying low-income consumers. Lifeline helps ensure that eligible consumers have the opportunities and security that phone service brings, including being able to connect to jobs, family, and emergency services.

Who Qualifies?

The Lifeline program is available to eligible low-income consumers in every state, territory, commonwealth, and on Tribal lands. Consumers with proper proof of eligibility may be qualified to enroll. To participate in the program, consumers must have an income that is at or below 135% of the federal Poverty Guidelines or participate in a qualifying state, federal or Tribal assistance program. These programs are:

- Medicaid
- Supplemental Nutrition Assistance Program (SNAP)
- Supplemental Security Income (SSI)
- Federal Public Housing Assistance (FPHA)
- Veterans Pension and Survivors Benefit Programs
- Tribal-specific programs: Bureau of Indian Affairs General Assistance, Food Distribution Program on Indian Reservations (FDPIR)

Federal rules prohibit eligible low-income consumers from receiving more than one Lifeline discount per household. An eligible consumer may receive a discount on either a wireline or wireless service, but not both. A consumer whose household currently is receiving more than one Lifeline service must select a single Lifeline provider and contact the other provider to de-enroll from their program. Consumers violating this rule may also be subject to criminal and/or civil penalties.

How to Apply for Lifeline?

If you do not have service and want to apply for Lifeline:

- Contact the local telephone company to place an application for service and fill out the Lifeline forms.
- Your service will be installed when your telephone company receives the approved form. At that time, the monthly Lifeline discount will begin. Your monthly Lifeline discount will begin only when the approved form has been received.

RTTI CALLING PLANS

Basic Plan – No Monthly Fee

Peak¹

15 cents/min. Interstate
20 cents/min. Instate
IntraLATA & InterLATA

Off Peak²

10 cents/min. Interstate
15 cents/min. Instate InterLATA & IntraLATA

¹ Peak – 7 am to 6:59 pm, M-F

² Off Peak – 7 pm to 6:59 am, M-F

Weekends and Major Holidays are Off Peak

Economy Plan- 3.95/mo. per Line

10 cents/min. Interstate⁴
12 cents/min. Interstate InterLATA and IntraLATA
24 hours a day – 7 days a week

Advanced Plan - \$4.95/ mo. per Line

7 cents/min. Interstate⁴
11 cents/min. Instate Inter and IntraLATA
24 hours a day – 7 days a week

Responsible Dialing Plan

\$5.95/mo. Per line or \$9.95 per line

6 cents/min. Interstate⁴
10 cents/min. Instate InterLATA and IntraLATA
24 hours a day – 7 days a week

RTTI Statement of Rates, Terms, and Conditions

A complete statement on which RTTI offers service is set forth in RTTI's Statement of Rates, Terms and Conditions (RTC) for Provision of Service, which is available for public inspection at RTTI's offices and via the RTTI link at www.rttmc.net. Acceptance of service from RTTI shall be deemed an agreement by Customer that the customer shall accept service from RTTI on the terms set forth in RTC, as such are currently and hereafter revised, and which are available for public inspection. The purpose of this Notice is to inform Customers of certain provisions of the RTC, which shall in no way limit, waive, or restrict the applicability of all terms and conditions contained in the RTC.

1. Customer is responsible for the payment of all charges for any and all services or facilities provided by RTTI to the customer and for compliance with all applicable terms of the RTC. If objection in writing is not received by RTTI within 30 days after the bill is rendered, Customer's account shall be deemed correct and binding upon the Customer.
2. RTTI retains the right to deny service to any customer who fails to comply with the rules and regulations of the RTC, or other applicable rules, regulations or laws.
3. Customer shall indemnify and hold RTTI harmless from and against: (1) all claims, liability, damage and expense, including attorneys' fees, due to claims for libel, slander, or infringement of copyright or trademark in connection with any material transmitted by the Customer using RTTI's Services; (2) any other claim resulting from any act or omission of the Customer relating to use of RTTI's facilities; and (3) the payment of all charges for service ordered by the Customer from a Local Exchange Carrier or other entities for telecommunications services and/or facilities connecting the Customer to RTTI.]
4. Customer shall reimburse RTTI for damages to the RTTI's facilities caused by negligence or willful act of Customer.
5. Customer understands that the services are furnished subject to the conditions that there will be no abuse fraudulent and/or illegal use thereof.
6. In addition to all recurring, non-recurring, minimum, usage, surcharge or special charges, Customer shall also be responsible for and shall pay all applicable federal, state and local taxes or surcharges, including sales, use, excise, gross earnings, and gross income taxes. All such taxes shall be separately shown and charged on bills rendered by RTTI or its billing agent. Such taxes and/or surcharges may be included as allowed by an applicable federal or state law or regulation.
7. A credit check will be mandatory and a security deposit may be required.
8. Payment will be due as specified on RTTI's bill to Customer. Commencing after that due date, a late charge will be applied to all amounts past due. Service may be denied or discontinued at RTTI's discretion for nonpayment of amounts due to RTTI past the due date. Restoration of Service will be subject to all applicable charges.
9. In the case where Customer submits a check to RTTI for payment, the check is returned for insufficient funds, or is otherwise not processed for payment, there will be a charge as set forth in the RTC. Such charge will be applicable on each occasion when a check is returned or not processed.

Fiber Connections and Power Supply's

In the event of power failure, a battery backup provides temporary power. Fiber connections do not prohibit loss of power. To maintain full backup charge, keep your backup equipment plugged in at all times. You may also be able to make 911 calls from your mobile device. It is recommended to limit the use of your backup power to voice emergency calling only. Typically battery back-ups provide up to 8 hours of additional use but the more you utilize your devices or phone the quicker your back up unit will end. Additional power supplies may be purchased.

Randolph Communications Terms and Conditions

I agree to subscribe to the RC High-Speed Internet Plan checked above, beginning on the date of installation of service. The monthly recurring rate as indicated. Standard installation charges will apply, unless other installation promotions are in place at the time of installation. I understand that if I do not fulfill the term commitment for this agreement, I am required to pay a \$499 early termination fee based on the selected commitment term that will be pro-rated. Other charges and conditions may also apply. A credit check will be completed to determine if other up-front fees are required. Standard installation includes connection of the internet service to one (1) computer. Additional computers may be networked to the internet service for an additional fee(s). Any internet or TV customer who does not sign a 36-month commitment must pay a non-refundable \$499.00 installation fee up front.

I understand and agree that I have requested RC to analyze and configure my computer system for Internet services. I understand that I will be charged for home Wi-Fi which will be an additional \$4.99/mo or \$8.99/mo based on structure of home. If more adapters are needed then additional fee will incur. I understand it is my responsibility to make sure that my computer system has been completely backed-up prior to any installation of hardware and/or software necessary to access high-speed data services. The actual connection speeds experienced by the customer will vary. I understand that RC shall not be responsible or liable for (1) Any file loss or corruption; (2) Hardware/software failure or corruption; (3) Any hardware or software configurations which may make the system unusable; and/or (4) Electrical surges that may cause damage to connected devices. RC is not responsible for any problems with my computer following the installation or repair of data services. I understand that if there is a modem failure within the commitment window, RC will replace the modem with a comparable unit. If the modem becomes inoperable after the commitment window, then I agree to replace the modem at my expense. RC is not responsible for problems with my computer following the installation of high-speed data service pursuant to this agreement. I hereby waive any claims I may have to bring any action against RC for any of the aforementioned failures, losses or defects. I acknowledge and understand these Terms and Conditions. No other agreement, verbal or otherwise, shall be binding upon the parties hereto.

Unlimited Long Distance Terms & Conditions - Customers may subscribe to local service provided by Randolph Communications and Randolph Telephone Telecommunications Inc. (RTTI) long distance. Calls not included in the Unlimited packages will be billed at tariff rates. The unlimited plan is for residential voice calls terminating within the continental U.S. (excludes Hawaii & Alaska) only. This plan may not be used to place calls to on-line data services, or Internet access services. The plan may not be used for commercial use or for any services that do not involve a person-to-person conversation or voice message. Calling card services, calls to International exchanges, calls to 900 numbers, Directory Assistance, operator services, data calls, calls to Hawaii & Alaska and any other use of the line not included. RC reserves the right to discontinue or change service to customers on the Unlimited Long Distance Plan if the Company determines that the long distance calling patterns are atypical of normal residential usage. If the Company determines that usage is not consistent with typical residential customer usage, the customer may be subject to discontinuation of this service and additional fee or offered an alternative plan at the Company's sole discretion. Additional regulatory charges apply with package. This package may not be used to qualify for any other tariff packages; all other tariff discounts do not apply. Billing month-to-month and rates are subject to change. RC reserves the right to discontinue the plan at its sole discretion with due notice to the customer. All elements of bundle must be retained to qualify for package pricing.

Bandwidth, Data Storage and Other Limitations - RC offers multiple packages of Service with varying speeds and features and bandwidth usage limitations (not all packages are available in all areas). You must comply with the current bandwidth, data storage, electronic mail and other Limitations of Service that correspond with the package of Service you selected. In addition to complying with the limitations for specific features, you must ensure that your activities do not improperly restrict, inhibit, or degrade any other user's use of the Service, nor represent (in RC's sole judgment) an unusually great burden on the network itself. In addition, you must ensure that your use does not improperly restrict, inhibit, disrupt, degrade or impede RC's ability to deliver the Service and monitor the Service, backbone, network nodes, and/or other network services. If you use excessive bandwidth (as determined by RC), RC may terminate, suspend, or require you to upgrade the Service and/or pay additional fees.

RC reserves the right to manage its network for the greatest benefit of the greatest number of subscribers including, without limitation, the following: rate limiting, rejection or removal of "spam" or otherwise unsolicited bulk email, anti-virus mechanisms, traffic prioritization, and protocol filtering. You expressly accept that such action on the part of RC may affect the performance of the Service. RC reserves the right to enforce limits on specific features of the Service including, without limitation, email storage (including deletion of dormant or unchecked email) and web hosting maximums. Visit Limitation of Services to learn the limits on specific features of the Service

Limitation of Liability - It is understood that RC is not an insurer, and that customer is responsible for obtaining any insurance coverage. Customer agrees to look exclusively to customer's insurer to recover for injury or damage in the event of any loss or injury, and releases and waives all right of recovery against RC arising by way of subrogation. The amount payable to RC hereunder is based upon the value of the services and the scope of liability as herein set forth and is unrelated to the value of the customer's property or property of others located in the customer's premises. The customer's exclusive remedy with respect to any and all losses or damages resulting from any cause whatsoever, including RC's negligence, shall be a refund of any service charges and fees paid to RC by the customer up to the time the damage is discovered. RC shall in no event be liable for any consequential or incidental damages of any nature, including without limitation, damages for personal injury, damages to property, or loss of business. Unless a longer period is required by applicable law, any action against RC in connection with this system must be commenced within one year after the cause of the action has accrued. The provisions of this paragraph shall apply if loss, damage or injury irrespective of cause or origin, results directly or indirectly to person or property from performance or nonperformance of obligations imposed by this contract or from negligence, active or otherwise, strict liability, violation of any applicable consumer protection law or any other alleged fault on the part of RC, its agents or employees. It is further agreed that the limitation on liability, expressed herein, shall inure to the benefit of and apply to all parent, subsidiary and affiliated RC companies. In the event any person not a party to this agreement shall make any claim or file any lawsuit against RC in any way relating to the equipment or services that are subjects of this agreement, including for failure of its equipment or services that are the subjects of this agreement, including for failure of its equipment or service in any respect, customer agrees to indemnify and hold harmless RC from any and all such claims and lawsuits including the payment of all damages, expenses, costs and attorney's fees.

Limited Warranty - If any equipment supplied by RC pursuant to this Service Agreement is found to be defective in material or workmanship within twelve (12) months of the date of completion or installation, then any such equipment will be repaired or replaced at RC's option with new or functionally operative equipment. Labor and material required to repair or replace such defective equipment will be free of charge for a period of twelve (12) months following the completion of the original installation. This limited warranty does not apply to: a) damage resulting from accidents, acts of God, alteration, misuse, tampering or abuse; b) failure of the customer to properly follow operation instructions provided at the time of installation or at a later date; and c) trouble due to interruption of commercial power or to the phone service. The foregoing limited warranty is in lieu of all other warranties, express or implied, including but not limited to, any implied warranties of merchantability or fitness for a particular purpose. No agent, employee or representative of RC, nor any other person, is authorized to modify this warranty in any respect. This warranty gives you specific legal rights and you may also have other rights, which vary from state to state.

Acknowledgment & Consent - Customer hereby acknowledges that RC has the capability to identify the URLs of the sites on the web that the customer accesses through his/her RC High Speed Data Service. Customer hereby consents to RC's access to and use of that information to improve its High Speed Data Service offerings. If the customer does not consent to such access to and use of this information, customer can request to be designated as "anonymous." RC will continue to track such usage information on an aggregated basis, and will not associate such usage with customer's name or account number.

General - RC assumes no liability for delays in installation of equipment and line, or for interruption of service due to strikes, riots, floods, fires, acts of God or any causes beyond the control of RC. RC is not required to supply service to customers during an interruption of service should the problem persist. Customer grants permission to RC to enter his/her premises if necessary to perform service to equipment as agreed herein. This agreement constitutes the entire agreement between the customer and RC. In executing this agreement customer is not relying on any advice or advertisement of RC. Customer agrees that any representation, promise, condition, inducement or warranty, express or implied, not included in writing in the agreement shall not be binding upon any party, and that the terms and conditions hereof applied as printed without alteration or qualification, except as specifically modified in writing. The terms and conditions of this agreement shall govern notwithstanding any inconsistent or additional terms and conditions or any purchase order, service or other document submitted by the customer. Customer understands that should the power fail while being serviced on fiber optics then phone service will be lost once battery back-up loses power.

Inside Wire/Internet/MyTV Maintenance: Phone plan includes all wiring inside the home that was installed to code, and also covers the maintenance and/or replacement of the battery back-up for fiber-optic subscribers. **MyTV:** All coax and cat5 wiring and remote controls. A limit of two remote control replacements available within a 12-mon. period if deemed that equipment was faulty. \$47.50 service fee applies. **Internet:** All wiring to modem, DSL filters. If no plan is chosen then customer is acknowledging responsibility for payment of all charges for service calls to the customer's premise if it is determined that the trouble is caused by the inside wiring, jacks or customer-owned equipment and not the company's equipment. Customers who do not select maintenance plan will be charged \$90 per hour for labor and material costs on service calls for interior wiring and equipment issues. At any time RC staff deems equipment is not safe and could cause harm to employee(s) then RC reserves the right to revoke inside wire maintenance. RC reserves the right to revoke inside wire maintenance should a customer abuse the replacement of wiring due to uncleanliness and biohazards that result in multiple equipment replacements.

Term & Termination: This agreement will have either 36-month term or no term because upfront installation fees were paid as selected by you when order is placed. At the end of Agreement's initial Term, Agreement will automatically renew for successive one mon. period ("Renewal Terms") unless either party provides the other party of its intent not to renew. If I choose to discontinue bundling services, current rates apply for all components unless customer is discontinuing internet or TV. Any 36-mon. commitment not fulfilled must pay the penalties: Cancellation of internet, \$99; TV, \$199 All fees apply as stated unless special promotion is active at the time order is placed.

Randolph Communications
YOUR RIGHTS ON CUSTOMER PROPRIETY NETWORK INFORMATION (CPNI)

Federal regulations permit Randolph Communications to use information about your telecommunications services to recommend other categories of products and services to you, unless you notify us otherwise. This applies to information about telecommunications services you buy from Randolph Communications, including the types of services you receive, how much you use them, how we provide them to you, and calling/billing records. Randolph Communications will use this information to offer you valuable new and additional services, including packages or bundles containing both Randolph Communications and Randolph Communications subsidiary products and services.

This information will be used by only those companies now or in the future that design, market or sell, or assist in the design, marketing or sale of (1) Randolph Communications communications-related services or (2) Randolph Communications subsidiaries communications-related services sold as part of a package or bundle with Randolph Communications communications-related services, including our agents, authorized sales representatives, joint venture partners/participants and independent contractors. Those companies include Randolph Communications, Randolph Telephone Telecommunications, Inc. and any other current or future direct or indirect subsidiaries of Randolph Communications that provide, design, market or sell or assist in the design, marketing or sale of any of the services described at the beginning of this paragraph.

Randolph Communications will protect the confidentiality of this information regardless of whether you approve or disapprove the uses described in this Notice. Under Federal law, you have the right to have your account treated confidentially and to restrict our use of this information, and Randolph Communications has a duty to protect the confidentiality of that information.

Due to rule changes made by the Federal Communications Commission (FCC), you will need to establish a password and a series of authentication questions in order to discuss call detail information with Randolph Communications on customer-initiated telephone calls. If you do not wish to establish a password, Randolph Communications will only be able to discuss call-detail records with you by calling you at your telephone number of record or by mailing the information to your address of record in order to comply with these federal regulations.

If you wish to prohibit our use of this information as described in this notice, call us at 336-879-5684 or e-mail us at csrep@rtmc.coop with your request within 30 days of your receipt of this notice. Your denial of approval for Randolph Communications to use this information will not affect the provision of any services to which you subscribe. Your approval or denial of approval for the use of CPNI outside of the service to which you already subscribe will remain valid until you revoke or limit the approval or denial.

We look forward to being able to serve your communications needs more efficiently with new and existing products and services based on the information we know about your account.

How Do I Pay My Bill?

Randolph Communications has made it easier than ever to make a payment. Choose any of the five options below.

- 1. Mail your payment to:** Randolph Communications, 317 East Dixie Drive, Asheboro, NC 27203
- 2. Visit any location:**
 - a. **Headquarters** - 317 East Dixie Drive, Asheboro, NC 27203
 - b. **Liberty** - 211 West Swannanoa Avenue, Liberty, NC 27298
- 3. Call 24/7 using RTMC ExpressPay (Available 24/7):** *(Please have Randolph Communications account information ready)*
Toll Free – 855-382-9920 (Visa, MC, Discover, Debit or Credit Card)
- 4. Pay On-Line at www.rtmc.net, “Pay My Bill”**
- 5. Automatic Draft**



Connecting Our Community



Randolph Communications
317 East Dixie Drive
Asheboro, NC 27203

336.879.5684 or 336.622.7900
www.rtmc.net



Auto Draft Authorization Agreement for Pre-arranged Payments Debits

Choose Draft by Checking or Credit Card

This is my authorization for Randolph Communications to automatically debit my:

Company Name

credit card debit card Visa MasterCard Discover

_____ (Card Number) _____ (Expiration Date)

Card Holder's: _____ Last three digits listed on signature line on back of card for Visa and MC or 4 digits on back for Discover card

Zip Code: _____ Address: _____
(House address not PO Box address)

checking savings account _____ (_____)
(Please attach a voided check) Account Number Bank Transit/ABA No.

at _____ in _____
Financial Institution City State Zip

I understand that this authorization will be in effect until I notify Randolph Communications in writing that I no longer desire this service, allowing it reasonable time to act on my notification. I also understand that if corrections in the debit amount are necessary, it may involve an adjustment (credit or debit) to my account.

I have the right to stop payment within 3 business days of a debit entry by notifying Randolph Communications before the account is charged. If an erroneous debit entry is charged against my account, I have the right to have the amount of the entry credited to my account by my institution, if, within 60 days following the date on which I as sent a statement of account, I give Randolph Communications a written notice identifying the entry, stating that it is in error and requesting credit back to my account.

THIS AUTHORIZATION IS NONNEGOTIABLE AND NONTRANSFERABLE.

Member/Account # _____

_____ CUSTOMER BILLING NAME

_____ CUSTOMER PHONE NUMBER

_____ DATE

_____ CUSTOMER SIGNATURE

Complete the above form with your credit card or checking account information.

Date, sign and return the form to:

Randolph Communications
317 East Dixie Drive
Asheboro, NC 27203

Credit/Debit card drafts will be made on the **17th** of the month for bill **Cycle 1**, on the **1st** of the month for bill **Cycle 2**, on the **8th** of the month for bill **Cycle 3** and on the **16th** of the month for bill **Cycle 4**. Deductions will begin the month we receive your authorization. **Visa, MasterCard and Discover Only.** If the draft date falls on a weekend or bank holiday, the draft will be processed the next business day.

Checking/Savings account drafts the bill **Cycle 1** drafts will be made on the **13th** of the month. For bill **Cycle 2** on the **28th** of the month, for bill **Cycle 3** on the **5th** of the month and for bill **Cycle 4** on the **12th** of the month and will begin the second month following the month we receive your authorization. The month your telephone bill is drafted, your telephone bill will state "Pay By Bank" in the "Enter Amount Paid" section of your telephone bill. If the draft date falls on a weekend or bank holiday, the draft will be processed the next business day.

Bill Cycle 1 includes 464, 581, and 879 exchanges.
Bill Cycle 2 includes 361, 381, 461, and 857 exchanges.
Bill Cycle 3 non-members
Bill Cycle 4 includes 622 exchange

	Credit Card	Bank Drafts
<i>Cycle 1</i>	17 th	13 th
<i>Cycle 2</i>	1 st	28 th
<i>Cycle 3</i>	8 th	5 th
<i>Cycle 4</i>	16 th	12 th

Be sure to **enclose a voided check**. Please include your bank's mailing address or phone number if at all possible. Should you have any questions, please call our office at (336) 879-5684 or email csrep@rtmc.net.

Programa de Lifeline: Forma de Aplicación



1. Sobre Lifeline

Lifeline es un beneficio federal que reduce el costo mensual de servicio telefónico o de internet.

Reglas

Si calificas, tu hogar puede obtener Lifeline para servicio de teléfono o internet, pero no ambos.

- Si obtienes Lifeline para servicio telefónico, puedes obtener el beneficio para un teléfono móvil o telefonía fija, pero no para los dos.
- Si obtienes Lifeline para servicio de internet, puedes obtener el beneficio para internet móvil o internet fijo, pero no para los dos.
- Si obtienes Lifeline para un paquete de servicio de teléfono e internet, puedes obtener el beneficio para un paquete de teléfono móvil o un paquete residencial, pero no para los dos.

Tu hogar no puede obtener Lifeline a través de más de una compañía telefónica o de internet.

Sólo se permite un beneficio de Lifeline por hogar, **no por persona**. Si más de una persona en tu hogar recibe Lifeline, estas infringiendo a las reglas de la FCC y perderás a tu beneficio.

¿Qué es un hogar?

Un hogar es un grupo de personas que viven juntas y comparten ingresos y gastos (aunque no sean parientes).

No le des tu beneficio a otra persona

Lifeline no es transferible. No puedes darle tu beneficio de Lifeline a otra persona, aunque califique.

Se honesto en esta forma

Tienes que dar información precisa y verdadera en esta forma y en todos las formas o cuestionarios relacionados con Lifeline. Si das información falsa o fraudulenta, perderás a tu beneficio de Lifeline (es decir, cancelación de tu suscripción o exclusión del programa) y el gobierno de los Estados Unidos podrá tomar acciones legales en tu contra. Esto puede incluir (per no es limitado a) multas o encarcelamiento.

Es posible que necesites mostrar otros documentos

Si tu compañía de teléfono o internet no puede comprobar que tú o alguien en tu hogar califica usando solamente esta forma y bases de datos, es posible que necesites mostrar un documento oficial de uno de los programas de gobierno que califican o demostrar a tus ingresos anuales. Puedes entregar copias de tus documentos oficiales con esta aplicación o esperar hasta que tu compañía de teléfono o internet te los pida. Para agregarlos ahora, incluye a los documentos en la opción 1 o la opción 2:

1. Si calificas a través de un programa de gobierno: copias de tu tarjeta de identificación estatal y de un documento oficial del programa que estas usando para calificar (tu tarjeta SNAP, tarjeta de Medicaid, o otro)
2. Si calificas a través de tus ingresos: copias de tu tarjeta de identificación estatal y comprobantes de pago para 3 meses consecutivos (o otros documentos aceptados)

Visita a lifelinesupport.org para ver la lista completa de documentos aceptados.

Aplicar

Para aplicar por un beneficio de Lifeline, llena todas las secciones de esta forma, iníciala a cada declaración del acuerdo, y firma a la última página.

Para aplicar, trae o envía por correo esta forma a tu compañía de teléfono o internet.

Programa de Lifeline:
Forma de Aplicación



2. Tu información

Todos los campos son obligatorios a menos que se indique. Use solo letras mayúsculas y tinta negra para llenar a esta forma.

<p>¿Cuál es tu nombre legal completo? El nombre que usas en documentos oficiales, como tu tarjeta de Seguro Social o identificación estatal. No uses un apodo.</p> <input type="text"/>																																					
Nombre																																					
<input type="text"/>																						<input type="text"/>															
Segundo Nombre (opcional)																						Sufijo (opcional)															
<input type="text"/>																																					
Apellido																																					
<p>¿Cuál es tu número de teléfono (si tienes uno)?</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>												<p>¿Cuál es tu fecha de nacimiento?</p> <table><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td>Mes</td><td>Día</td><td colspan="2">Año</td></tr></table>																		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Mes	Día	Año	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																		
Mes	Día	Año																																			
<p>¿Cuál es tu dirección de correo electrónico (si tienes una)?</p> <input type="text"/> <input type="text"/>																																					
<p>¿Cuáles son los últimos 4 números de tu Número de Seguro Social (SSN)?</p> <input type="text"/>																								<input type="text"/>													
<p>Si no tienes un SSN, cuál es tu Número de Identificación Tribal?</p> <input type="text"/>																																					
<p>¿Cuál es la mejor manera de contactarte?</p> <input type="checkbox"/> correo electrónico <input type="checkbox"/> teléfono <input type="checkbox"/> mensaje de texto <input type="checkbox"/> correo																																					

Programa de Lifeline: Forma de Aplicación



2. Tu información (continuado)

*Las tierras tribales incluyen cualquier reserva, pueblo, o colonia reconocida federalmente como tribu indígena, incluyendo reservas anteriores en Oklahoma; regiones nativas de Alaska establecidas de acuerdo con la Alaska Native Claims Settlement Act (85 Stat. 688); asignaciones indias; Hawaiian Home Lands—áreas mantenidas en fideicomiso para los Hawaianos nativos por el estado de Hawaii, de acuerdo con la Hawaiian Homes Commission Act, 1920 July 9, 1921, 42 Stat. 108, et. seq., en su forma modificada; y cualquier terreno designado como tal por la Comisión para los propósitos de esta parte de acuerdo con el proceso de designación en las reglas de Lifeline de la FCC.

¿Cual es la dirección de tu casa? (La dirección donde vas a recibir el servicio. No uses un P.O. Box)

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Número y Nombre de Calle

--	--

Dpto., Unidad, Otro Ciudad

--	--

Estado Código Postal

¿Es una dirección temporal? Sí No **Marca esta caja si vives en tierras Tribales***

¿Cuál es tu dirección postal? (Solo llena esta sección si no es la misma que tu casa)

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Número y Nombre de Calle

--	--

Dpto., Unidad, Otro Ciudad

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Estado Código Postal

Programa de Lifeline: Forma de Aplicación



3. Califica para Lifeline

Llena esta sección para demostrar que tú, tu dependiente, o alguien de tu hogar califica para Lifeline.

Puedes calificar a través de algunos programas de asistencia de gobierno o a través de tus ingresos (no necesitas calificar a través de los dos).

Califica a través de un programa de gobierno:

Marca a todos los programas que tu o alguien en tu hogar tiene:

- Programa de Asistencia para Nutrición Suplementaria (SNAP) (Estampillas para Alimentos)
- Seguridad de Ingreso Suplementario (SSI)
- Medicaid
- Asistencia Federal para la Vivienda Pública (FPHA)
- Pensión de Veteranos y Beneficios para Sobrevivientes

Programas Específicos Para Tribus

- Asistencia General del Bureau of Indian Affairs (BIA)
- Asistencia Temporal para Familias Necesitadas de Tribus (TANF Tribal)
- Programa de Distribución de Alimentos en Reservaciones Indígenas (FDPIR)
- Head Start (solo los hogares que cumplen con el estándar de ingresos)



Califica a través de tus ingresos:

(Sólo llena esta forma si no calificas a través de un programa de gobierno.)

¿Incluyéndote a ti, cuántas personas viven en tu hogar? (marca a una caja)	¿Tus ingresos son iguales o menos que la cantidad enumerada para tu estado y tamaño del hogar? (Solo marca sí o no a lado de la cantidad que le corresponde al tamaño de tu hogar)			
	Todos los 48 estados y DC (no Alaska y Hawái)	Alaska	Hawái	
<input type="checkbox"/> 1	\$16,389	\$20,493	\$18,846	<input type="checkbox"/> Sí <input type="checkbox"/> No
<input type="checkbox"/> 2	\$22,221	\$27,783	\$25,555.50	<input type="checkbox"/> Sí <input type="checkbox"/> No
<input type="checkbox"/> 3	\$28,053	\$35,073	\$32,265	<input type="checkbox"/> Sí <input type="checkbox"/> No
<input type="checkbox"/> 4	\$33,885	\$42,363	\$38,974.50	<input type="checkbox"/> Sí <input type="checkbox"/> No
<input type="checkbox"/> 5	\$39,717	\$49,653	\$45,684	<input type="checkbox"/> Sí <input type="checkbox"/> No
<input type="checkbox"/> 6	\$45,549	\$56,943	\$52,393.50	<input type="checkbox"/> Sí <input type="checkbox"/> No
<input type="checkbox"/> 7	\$51,381	\$64,233	\$59,103	<input type="checkbox"/> Sí <input type="checkbox"/> No
<input type="checkbox"/> 8	\$57,213	\$71,523	\$65,812.50	<input type="checkbox"/> Sí <input type="checkbox"/> No
<input type="checkbox"/> Si son más de 8, agrega esta cantidad por cada persona adicional:	Agrega \$5,832	Agrega \$7,290	Agrega \$6,709.50	<input type="checkbox"/> Sí <input type="checkbox"/> No

135% de las Guías Federales de Pobreza 2018
*Las Guías de Pobreza Federal se actualizan típicamente a fines de enero.

Programa de Lifeline: Forma de Aplicación



4. Acuerdo

Acepto, bajo pena de perjurio, las siguientes declaraciones:

Iniciala junto a cada declaración.

Iniciales

Actualmente, yo (o mi dependiente o otra persona en mi hogar) recibo beneficios del programa de gobierno enumerada en esta forma o los ingresos anuales de mi hogar son al nivel o menos del 135% de las Guías Federales de Pobreza (la cantidad enumerada en la tabla de Guías Federales de Pobreza en esta forma).

Iniciales

Estoy de acuerdo en que si me mudo, le daré a mi proveedor de servicios mi nueva dirección dentro de 30 días.

Iniciales

Entiendo que necesito informar a mi proveedor de servicios dentro de 30 días si ya no califico para Lifeline, incluyendo:

- 1) Yo, o la persona de mi hogar que califica, ya no califico a través de un programa de gobierno o de ingresos.
- 2) Yo o alguien en mi hogar recibe más de un beneficio de Lifeline (incluyendo, más de un servicio de internet de banda ancha Lifeline, más de un servicio telefónico Lifeline, o los dos servicios telefónico Lifeline e internet de banda ancha Lifeline).

Iniciales

Sé que mi hogar sólo puede obtener un beneficio de Lifeline y, al mejor de mi conocimiento, mi familia no recibe más de un beneficio de Lifeline.

Iniciales

Estoy de acuerdo en que mi proveedor de servicios pueda darle al administrador del Programa de Lifeline toda la información que estoy dando en esta forma. Entiendo que esta información está destinada a ayudar a ejercer al Programa de Lifeline y que si no permito que lo entreguen al administrador, no podré obtener los beneficios de Lifeline.

Iniciales

Todas las respuestas y acuerdos que he escrito en esta forma son verdaderos y correctos al mejor de mi conocimiento.

Iniciales

Sé que voluntariamente dar información falsa o fraudulenta para obtener beneficios del Programa de Lifeline es castigable por la ley y puede resultar en multas, tiempo de cárcel, la cancelación de mi suscripción, o exclusión del programa.

Iniciales

Es posible que en cualquier momento, mi proveedor de servicios tenga que comprobar si todavía califico. Si necesito recertificar (renovar) a mi beneficio de Lifeline, entiendo que tengo que responder antes de la fecha límite o que me eliminarán del Programa de Lifeline y mi beneficio Lifeline parara.

Iniciales

Yo fui sincero cuando indique si vivo o no vivo en tierras tribales, como se define en la sección 2 de esta forma.

Doy mi consentimiento para que USAC me contacte en mi número de teléfono de Lifeline para recibir recordatorios y actualizaciones importantes sobre mi servicio de Lifeline. Se pueden aplicar tarifas de mensajes y datos. Envíe STOP por mensaje de texto para detener a los mensajes.

Firma	Fecha de hoy
<input type="text"/>	<input type="text"/>

Programa de Lifeline: Forma de Aplicación



5. Información del Agente

Responde sólo si una
persona de ventas entrega
esta forma.

¿Cuál es el nombre legal completo del agente?
El nombre que usa en los documentos oficiales, como su tarjeta de Seguro Social o identificación estatal. No uses un apodo.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Nombre

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Segundo Nombre (opcional)

--	--	--	--

Sufijo (opcional)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Apellido

¿Cuál es el número de identificación del agente?

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

¿Cuál es la fecha de nacimiento del agente?

--	--

Mes

--	--

Día

--	--	--	--

Año



Notificación

NOTIFICACIÓN DE LA LEY DE REDUCCIÓN DE TRÁMITES: la sección 54.410 de las normas de la Comisión Federal de Comunicaciones (Federal Communications Commission, FCC) exige que todos los suscriptores de Lifeline demuestren su elegibilidad para recibir los servicios de Lifeline. Esta recopilación de información se deriva de la autoridad de la Comisión según la Sección 254 de la Ley de Comunicaciones de 1934, en su forma enmendada, Título 47 del Código de los Estados Unidos (United States Code, U.S.C.) sección 254. Usando esta autoridad, la FCC designó a la Compañía Administrativa de Servicio Universal (Universal Service Administrative Company, USAC) como la administradora permanente de Lifeline. La FCC publicó las normas que detallan cómo los consumidores pueden calificar para los servicios de Lifeline y cuáles servicios pueden recibir (título 47 del Código de Regulaciones Federales [Code of Federal Regulations, CFR], sección 54.400 et seq.). La USAC utilizará la información proporcionada en respuesta a esta recopilación de información para verificar la elegibilidad del solicitante para los servicios de Lifeline.

Estimamos que cada respuesta a esta recopilación de información tomará, en promedio, entre 0.25 y 0.75 horas. Nuestra estimación incluye el tiempo para leer las preguntas, examinar los registros existentes, recopilar la información necesaria y en efecto completar y revisar el formulario o la respuesta. Si tiene algún comentario sobre esta estimación, o sobre cómo podemos mejorar la recopilación y reducir la carga que representa para usted, escriba a la Comisión Federal de Comunicaciones, a la Oficina del Director General de la División de Evaluación del Desempeño y Gestión de Registros (Office of Managing Director-Performance Evaluation and Records Management, OMD-PERM), Proyecto de Reducción de Trámites (3060-0819), Washington, D.C. 20554. También aceptaremos sus comentarios a través de Internet si los envía a PRA@fcc.gov. NO ENVÍE Las formas LLENOS DE RECOPIACIÓN DE INFORMACIÓN A ESTA DIRECCIÓN.

Recuerde – no es necesario que responda a una recopilación de información patrocinada por el gobierno federal y el gobierno no puede realizar ni patrocinar esta recopilación, a menos que muestre un número de control vigente de la Oficina de Administración y Presupuesto (Office of Management and Budget, OMB). A esta recopilación se le asignó el número de control de la OMB 3060-0819.

La Comisión está autorizada, de acuerdo con la Ley de Comunicaciones de 1934, en su forma enmendada, a recopilar la información que solicitamos en esta forma. Si creemos que puede haber una violación o posible violación de un estatuto o reglamento, norma u orden de la Comisión, su respuesta podría remitirse a la agencia federal, estatal o local responsable de investigar, enjuiciar, hacer cumplir o implementar el estatuto, norma, regulación u orden.

Si no proporciona la información que solicitamos en esta forma, usted no será elegible para recibir los servicios de Lifeline, de acuerdo con las normas del programa Lifeline, título 47 del C.F.R., sección 54.400-54.423.

La Ley de Reducción de Trámites de 1995, P.L. No. 104-13, título 44 del U.S.C., sección 3501, et seq, exige la notificación que precede

DECLARACIÓN DE LA LEY DE PRIVACIDAD: la Ley de Privacidad es una ley que exige que la Comisión Federal de Comunicaciones (FCC) y la Compañía Administrativa de Servicio Universal (USAC) expliquen por qué le pedimos a las personas información personal y lo que vamos a hacer con esta información una vez que la recopilamos.

Autoridad: la Sección 254 de la Ley de Comunicaciones (título 47 del U.S.C., sección 254), en su forma enmendada, autoriza a la FCC a operar el programa Lifeline. Usando esta autoridad, la FCC designó a la USAC como la administradora permanente de Lifeline. La FCC publicó las normas que detallan cómo los consumidores pueden calificar para los servicios de Lifeline y cuáles servicios pueden recibir (título 47 del CFR, sección 54.400 et seq.).

Propósito: recopilamos esta información personal para que podamos verificar que usted califica para el programa Lifeline y para que podamos brindarle de manera eficiente los servicios de Lifeline. Accedemos, mantenemos y utilizamos su información personal de la manera descrita en la Notificación del Sistema de Registros (System of Records Notice, SORN) de Lifeline, FCC/WCB-1, que publicamos en 82 Fed. Reg. 38686 (15 de agosto de 2017).

Usos de rutina: podemos compartir la información personal que ingrese en esta forma con otras partes para fines específicos, tales como: con contratistas que nos ayudan a operar el programa Lifeline; con otras agencias gubernamentales federales y estatales que nos ayudan a determinar su elegibilidad para Lifeline; con las compañías de telecomunicaciones que le brindan el servicio de Lifeline; y con fuerzas policiales y otros funcionarios que investigan posibles violaciones de las normas de Lifeline.

Una lista completa de las formas en que podemos usar su información se publica en la SORN de Lifeline descrita en el párrafo "Propósito" de esta declaración.

Divulgación: usted no está obligado a proporcionar la información que solicitamos en esta forma, pero si no lo hace, no será elegible para recibir los servicios de Lifeline según las normas del programa Lifeline, título 47 del C.F.R., sección 54.400-54.423.

Lifeline Program Application Form



1. About Lifeline

Lifeline is a federal benefit that lowers the monthly cost of phone or internet service.

Rules

If you qualify, your household can get Lifeline for phone or internet service, but not both.

- If you get Lifeline for phone service, you can get the benefit for one mobile phone or one home phone, but not both.
- If you get Lifeline for internet service, you can get the benefit for your mobile phone or your home connection, but not both.
- If you get Lifeline for bundled phone and internet service, you can get the benefit for your mobile phone bundled service or your home bundled service, but not both.

Your household cannot get Lifeline from more than one phone or internet company.

You are only allowed to get one Lifeline benefit per household, **not per person**. If more than one person in your household gets Lifeline, you are breaking the FCC's rules and will lose your benefit.

What is a household?

A household is a group of people who live together and share income and expenses (even if they are not related to each other).

Do not give your benefit to another person

Lifeline is non-transferable. You cannot give your Lifeline benefit to another person, even if they qualify.

Be honest on this form

You must give accurate and true information on this form and on all Lifeline-related forms or questionnaires. If you give false or fraudulent information, you will lose your Lifeline benefit (i.e., de-enrollment or being barred from the program) and the United States government can take legal actions against you. This may include (but is not limited to) fines or imprisonment.

You may need to show other documents

You will need to show your phone or internet company an official document from one of the government qualifying programs or prove your annual income. Please provide copies of your official documents with this application. Include the documents in option 1 or option 2 below:

1. If you qualify through a government program: copies of your state ID card and an official document from the program you are qualifying through (your SNAP card, Medicaid card, Supplemental Security Income (SSI) benefit letter, Federal Public Housing Assistance (FPHA) award letter, or other accepted documents).
2. If you qualify through your income: copies of your state ID card and your last state, federal, or Tribal tax return, pay stubs for 3 consecutive months, or other accepted documents. Visit lifelinesupport.org to see the full list of accepted documents.

Visit lifelinesupport.org to see the full list of accepted documents.

Apply

To apply for a Lifeline benefit, fill out every section of this form, initial every agreement statement, and sign the last page.

To apply, bring or mail this form to your phone or internet company.

Lifeline Program Application Form



2. Your Information

All fields are required unless indicated. Use only CAPITALIZED LETTERS and black ink to fill out this form.

What is your full legal name?
The name you use on official documents, like your Social Security Card or State ID. Not a nickname.

--	--	--	--

First

--	--

Middle (optional) Suffix (optional)

--

Last

What is your phone number (if you have one)? **What is your date of birth?**

--	--	--	--	--	--	--	--	--	--	--	--

Month Day Year

What is your email address (if you have one)?

What are the last 4 numbers of your Social Security Number (SSN)? [] [] [] []

If you do not have a SSN, what is your Tribal Identification Number?

--

What is the best way to reach you?

email
 phone
 text message
 mail

Lifeline Program Application Form



3. Qualify for Lifeline

Fill out this section to show that you, your dependent, or someone in your household qualifies for Lifeline.

You can qualify through some government assistance programs or through your income (you do not need to qualify through both).

Qualify through a government program:

Check all programs that you or someone in your household have:

- Supplemental Nutrition Assistance Program (SNAP) (Food Stamps)
- Supplemental Security Income (SSI)
- Medicaid
- Federal Public Housing Assistance (FPHA)
- Veterans Pension or Survivors Benefit Programs

Tribal Specific Programs

- Bureau of Indian Affairs (BIA) General Assistance
- Tribal Temporary Assistance for Needy Families (Tribal TANF)
- Food Distribution Program on Indian Reservations (FDPIR)
- Tribal Head Start (only households that meet the income qualifying standard)

Or

Qualify through your income:

(Only fill this out if you do not qualify through a government program.)

Including you, how many people live in your household? (check one)	Is your income the same or less than the amount listed for your state and household size? (only check yes or no next to your household size)				
	All 48 States & DC (not Alaska and Hawaii)	Alaska	Hawaii	Yes	No
<input type="checkbox"/> 1	\$16,389	\$20,493	\$18,846	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 2	\$22,221	\$27,783	\$25,555.50	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 3	\$28,053	\$35,073	\$32,265	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 4	\$33,885	\$42,363	\$38,974.50	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 5	\$39,717	\$49,653	\$45,684	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 6	\$45,549	\$56,943	\$52,393.50	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 7	\$51,381	\$64,233	\$59,103	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 8	\$57,213	\$71,523	\$65,812.50	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> If more than 8, add this amount for each extra person:	Add \$5,832	Add \$7,290	Add \$6,709.50	<input type="checkbox"/>	<input type="checkbox"/>

135% of the 2018 Federal Poverty Guidelines
*The Federal Poverty Guidelines are typically updated at the end of January.

Lifeline Program Application Form



4. Agreement

I agree, under penalty of perjury, to the following statements:

You must initial next to each statement.

Initial I (or my dependent or other person in my household) currently get benefits from the government program(s) listed on this form or my annual household income is 135% or less than the Federal Poverty Guidelines (the amount listed in the Federal Poverty Guidelines table on this form).

Initial I agree that if I move I will give my service provider my new address within 30 days.

Initial I understand that I have to tell my service provider within 30 days if I do not qualify for Lifeline anymore, including:

- 1) I, or the person in my household that qualifies, do not qualify through a government program or income anymore.
- 2) Either I or someone in my household gets more than one Lifeline benefit (including, more than one Lifeline broadband internet service, more than one Lifeline telephone service, or both Lifeline telephone and Lifeline broadband internet services).

Initial I know that my household can only get one Lifeline benefit and, to the best of my knowledge, my household is not getting more than one Lifeline benefit.

Initial I agree that my service provider can give the Lifeline Program administrator all of the information I am giving on this form. I understand that this information is meant to help run the Lifeline Program and that if I do not let them give it to the Administrator, I will not be able to get Lifeline benefits.

Initial All the answers and agreements that I provided on this form are true and correct to the best of my knowledge.

Initial I know that willingly giving false or fraudulent information to get Lifeline Program benefits is punishable by law and can result in fines, jail time, de-enrollment, or being barred from the program.

Initial My service provider may have to check whether I still qualify at any time. If I need to recertify (renew) my Lifeline benefit, I understand that I have to respond by the deadline or I will be removed from the Lifeline Program and my Lifeline benefit will stop.

Initial I was truthful about whether or not I am a resident of Tribal lands, as defined in section 2 of this form.

I consent to let USAC contact me at my Lifeline phone number for important reminders and updates to my Lifeline service. Message and data rates may apply. Text STOP to end messages.

Signature	Today's Date
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>

Lifeline Program Application Form



5. Agent Information

*Answer only if a sales
person submits this form.*

What is the agent's full legal name?
The name you use on official documents, like your Social Security Card or State ID. Not a nickname.

First

Middle (optional)

Suffix (optional)

Last

What is the agent's ID number?

What is the agent's date of birth?

Month Day Year

Lifeline Program Application Form



Notice

PAPERWORK REDUCTION ACT NOTICE: Section 54.410 of the Federal Communications Commission's rules requires all Lifeline subscribers to demonstrate their eligibility to receive Lifeline services. This collection of information stems from the Commission's authority under Section 254 of the Communications Act of 1934, as amended, 47 U.S.C. §254. Using this authority, the FCC has designated USAC as the permanent Lifeline Administrator. The FCC has published rules detailing how consumers can qualify for Lifeline services and what Lifeline services they may receive (47 CFR §54.400 et seq.). The data provided in response to this information collection will be used by USAC to verify the applicant's eligibility for Lifeline services.

We have estimated that each response to this collection of information will take, on average, between 0.25 and 0.75 hours. Our estimate includes the time to read the questions, look through existing records, gather the required data, and actually complete and review the form or response. If you have any comments on this estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, OMD-PERM, Paperwork Reduction Project (3060-0819), Washington, D.C. 20554. We also will accept your comments via the Internet if you send them to PRA@fcc.gov. Please DO NOT SEND COMPLETED DATA COLLECTION FORMS TO THIS ADDRESS.

Remember – You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid Office of Management and Budget (OMB) control number. This collection has been assigned an OMB control number of 3060-0819.

The Commission is authorized under the Communications Act of 1934, as amended, to collect the information we request on this form. If we believe there may be a violation or potential violation of a statute or a Commission regulation, rule, or order, your response may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing, or implementing the statute, rule, regulation, or order.

If you do not provide the information we request on this form, you will not be eligible to receive Lifeline services under the Lifeline Program rules, 47 C.F.R. §§ 54.400-54.423.

The foregoing Notice is required by the Paperwork Reduction Act of 1995, P.L. No. 104-13, 44 U.S.C. § 3501, et seq.

PRIVACY ACT STATEMENT: The Privacy Act is a law that requires the Federal Communications Commission (FCC) and the Universal Service Administrative Company (USAC) to explain why we are asking individuals for personal information and what we are going to do with this information after we collect it.

Authority: Section 254 of the Communications Act (47 U.S.C. § 254), as amended, 47 U.S.C. §254, authorizes the FCC to operate the Lifeline program. Using this authority, the FCC has designated USAC as the permanent Lifeline Administrator. The FCC has published rules detailing how consumers can qualify for Lifeline services and what Lifeline services they may receive (47 CFR §54.400 et seq.).

Purpose: We are collecting this personal information so we can verify that you qualify for the Lifeline program and so we can efficiently provide Lifeline services to you. We access, maintain and use your personal information in the manner described in the Lifeline System of Records Notice (SORN), FCC/WCB-1, which we have published in 82 Fed. Reg. 38686 (Aug. 15, 2017).

Routine Uses: We may share the personal information you enter into this form with other parties for specific purposes, such as: with contractors that help us operate the Lifeline program; with other federal and state government agencies that help us determine your Lifeline eligibility; with the telecommunications companies that provide you Lifeline service; and with law enforcement and other officials investigating potential violations of Lifeline rules.

A complete listing of the ways we may use your information is published in the Lifeline SORN described in the "Purpose" paragraph of this statement.

Disclosure: You are not required to provide the information we are requesting, but if you do not, you will not be eligible to receive Lifeline services under the Lifeline Program rules, 47 C.F.R. §§ 54.400-54.423.