

Last Name

First Name

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Date ____/____/____ Agent _____



Illinois Telephone Corporation

www.illinoistelephone.com



UNIVERSAL TELEPHONE ASSISTANCE PROGRAMS
ELIGIBLE TELECOMMUNICATIONS CARRIER

DO NOT WRITE IN THIS SPACE.

P.O. Box 845, Hillside, IL 60162-0845 (800) 480-4198 Fax (708) 632-5128

DO NOT WRITE IN THIS SPACE.

RESIDENTIAL Standard Phone Service Order Form and Letter of Agency

UNLIMITED LOCAL CALLING FROM YOUR HOME!

- **“I-TEL SAVER PLUS” Plan: \$36.99** per month + tax. Includes unlimited local and unlimited local toll calling, Caller ID, Call Waiting, Call Forwarding, *69, 3-Way Calling, Repeat Dialing, and Speed Dialing.

(For residents of Chicago and some nearby suburbs, unlimited calling area will include area codes 312, 773, 630, 708, 847, 224, and parts of 815).

Add VOICE MAIL for only \$5.00 per month! Domestic long distance available for only 5 cents per minute!

To order new line(s):

- 1 Complete and sign the Residential Service Form below.
- 2 Check the “Connect NEW line(s)” box.
- 3 Mail the form using the enclosed envelope and include a money order for \$95.00 per line (or \$63.00 on Lifeline/Linkup, requires submission of certification form). Or you may call us with your credit or debit card number.
- 4 Your new service will be activated within 5-10 working days. Call 1-800-480-4198, four business days after you mail or fax the form to receive the date of your service activation.

To switch your existing line(s):

- 1 Complete and sign the Residential Service Form below.
- 2 Check the “Convert EXISTING line(s)” box, and indicate numbers to be switched. You will keep your same number(s).
- 3 Mail the form using the enclosed envelope and include a money order for \$70.00 per line (or \$63.00 on Lifeline/Linkup, requires submission of certification form). Or you may call us with your credit or debit card number.
- 4 Your service will be switched to Illinois Telephone within 10-15 working days. There is no need to contact your current local phone service provider.

CHECK ONE BELOW:

Connect NEW line(s) Quantity: _____ Connection fee required for new line(s).

OR

Convert EXISTING line(s) (list numbers here): _____

NAME: First _____ Last _____

ADDRESS: _____ APT # _____

CITY _____ STATE _____ ZIP _____

Cell phone number, work phone number, or friends number. (In case there are any questions.): _____

LANDLORD (For building access): NAME _____ PHONE _____

CHECK ANY ADDITIONAL OPTIONS YOU ARE REQUESTING:

Domestic Long Distance (Only 5 cents per minute, no minimum, no surcharge).

Non-Listed Number (\$2.25 per month).

Voice Mail (\$5.00 per month).

Other: _____

Pricing does not include applicable federal state and municipal taxes.

Orders can only be cancelled before the due date and will incur a \$20.00 processing fee.

This letter is for purpose of authorizing Illinois Telephone Corporation to act in my behalf when transmitting instructions and orders for the installation, removal, or repair of telephone equipment/services, or when requesting any necessary information.

- I understand that with Illinois Telephone, **ALL TELEPHONE SERVICE CHARGES ARE PREPAY AND BILLED FOR THE MONTH AHEAD.**
- I understand that Illinois Telephone Corporation automatically posts a \$5.00 late charge on bills that are overdue. I also understand that Illinois Telephone **AUTOMATICALLY DISCONNECTS SERVICE IF THE BILL IS 14 DAYS LATE.**
- I understand that 411 and 555-1212 directory assistance calls, and name finder service calls will be charged at **95 CENTS EACH TO MY BILL.**
- I understand that Illinois Telephone Corporation is only responsible for dial tone to the interface on my home and that **THE CONNECTION FEE DOES NOT INCLUDE HOOKUP OR REPAIR OF ANY BUILDING WIRING OR PHONE JACKS.** If any problems exist or arise between the interface and the phone jack(s) an additional service charge will be applied to my phone bill if Illinois Telephone Corporation completes the repair.

AUTHORIZED SIGNATURE _____