

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

\_\_\_\_\_  
Agent



**Illinois Telephone Corporation**

www.illinoistelephone.com



DO NOT WRITE IN THIS SPACE. 2019 N. Mannheim Rd. Melrose Park, IL 60160 (800) 480-4198 Fax (708) 531-0251 DO NOT WRITE IN THIS SPACE.

## I-TEL LIFELINE PLAN: **Start New Service With No Money Down!** **First Month Free!**

Plan price is only \$30.75 per month + tax. Includes unlimited Local calling, 500 minutes of combined Local-Toll and Long Distance calling per month, Caller ID and Call Waiting.

### To order:

1. Complete and sign the Residential Service Order Form below.
2. Complete and sign the Federal Assistance Certification Form below.
3. Mail the form using the enclosed envelope, or you may fax the form to 708-531-0251.
4. Your new service will be activated within 7 days. Call 1-800-480-4198, three business days after you mail the form to receive your new phone number and the date of your new service activation.

### Residential Service Order Form:

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ APT # \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CELL NUMBER, WORK NUMBER, OR FRIENDS NUMBER. (In case there are any questions.): \_\_\_\_\_

CHECK ANY ADDITIONAL OPTIONS YOU ARE REQUESTING:

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

Pricing does not include 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 Illinois Telephone Corporation automatically charges a \$5.00 late fee on bills that are overdue. I understand that Illinois Telephone Corporation **AUTOMATICALLY DISCONNECTS SERVICE IF THE BILL IS 7 DAYS LATE.**
- I understand that Collect Calls, \*69, 3-Way Calling, and Call Forwarding features are blocked.
- I understand that with Illinois Telephone, **ALL TELEPHONE SERVICE CHARGES ARE PREPAY AND BILLED FOR THE MONTH AHEAD.**
- I understand that **ANY OPERATOR ASSISTED CALLS MADE FROM MY PHONE LINE WILL BE CHARGED TO MY BILL AT A MAXIMUM RATE OF \$7.72 FOR THE FIRST MINUTE AND \$0.38 FOR EACH ADDITIONAL MINUTE.**
- I understand that 411 and 555-1212 directory assistance calls, and name finder service calls will be charged at **\$2.25 EACH TO MY BILL.**
- I understand that Illinois Telephone Corporation does NOT guarantee phone service to any phone jacks. Illinois Telephone Corporation is only responsible for phone service to the network interface on my home. **THE CONNECTION FEE DOES NOT INCLUDE HOOKUP OR REPAIR OF ANY BUILDING WIRING OR PHONE JACKS.**

SIGNATURE \_\_\_\_\_

### Federal Assistance Certification Form:

I hear by certify, under penalty of perjury, that:

I am currently participating in at least one of the following federal assistance programs: Medicaid; Food Stamps; Supplemental Security Income; Federal Public Housing Assistance (Section 8); Low-Income Home Energy Assistance Program; National School Lunch Program's free lunch program; or Temporary Assistance for Needy Families.

And that I will notify Illinois Telephone Corporation if I cease to participate in the program.

The program above that I am eligible under is: \_\_\_\_\_

My identification number for the program above that I am eligible under is: \_\_\_\_\_

Printed name of person receiving federal assistance (must match name on the service order form above): \_\_\_\_\_

SIGNATURE (of person above) \_\_\_\_\_ DATE \_\_\_\_\_