

**NEW WINDSOR CABLE TV, INC**  
**APPLICATION FOR TELEPHONE SERVICE - CLEC**

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ PO Box: \_\_\_\_\_

City, State Zip: \_\_\_\_\_ County: \_\_\_\_\_

Phone Number 309-667-\_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

S.S.N.: \_\_\_\_\_ Spouse S.S.N.: \_\_\_\_\_

Drivers License # \_\_\_\_\_

Employer Name & Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Spouse Employer Name & Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Previous Address & Phone Number: \_\_\_\_\_

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**MARKETING:** Would you like to receive information on new products/services available within our Company? YES or NO Within our Subsidiary's (New Windsor Cable TV/Windsor Tel)? YES or NO

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The following will be added to my phone/cable account information in accordance with the FCC's ruling to protect my proprietary information.

**CPNI (Customer Proprietary Network Information) Password:** \_\_\_\_\_

Backup authentication questions for lost or forgotten password. You may choose to answer **up to four** of the

following: Favorite Color \_\_\_\_\_ Pet's Name \_\_\_\_\_

Favorite Sports Team \_\_\_\_\_ Favorite Hobby \_\_\_\_\_

**I authorize the following person's to obtain information and make changes to my telephone/cable account:**

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Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_

**Must be signed by the person on the account**

# NEW WINDSOR CABLE TV, INC - TELEPHONE SERVICE - CLEC

The undersigned makes application for the following service, and for such additional service as may be ordered later, and agrees to pay established rates for all such services.

**Residential Service** Installation \$ 20.50

**Business Service** Installation \$ 25.00

**Deposit** Toll Denial \$50.00 Residential \$136.00 Business \$180.00 Waived by: \_\_\_\_\_

**Long Distance** New Windsor CATV LD \_\_\_\_\_ Other: \_\_\_\_\_

TRIO Long Distance \_\_\_\_\_

**Features** Call Waiting 1.25/1.00 Call Forwarding 1.25/1.00 3-Way Calling 1.25/1.00

Speed Calling 1.25/1.00 Voice Mail 2.50 Caller ID 3.50

Other: \_\_\_\_\_

**Published** List as: \_\_\_\_\_ Non Published .73

**Addlist** .34 List as: \_\_\_\_\_

In making this application the undersigned agrees to the rules and regulations of the New Windsor Cable TV, Inc. as set forth in the exchange tariff, and to any general changes in the rules, regulations, tariffs or rates for the service furnished under this application. This application becomes a contract when accepted in writing by the New Windsor Cable TV, Inc.

**Signature** \_\_\_\_\_

**Connection Date** \_\_\_\_\_

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## PREFERRED CARRIER FREEZE AUTHORIZATION

(Must be signed by person responsible for the New Windsor Cable TV, Inc. Account)

I hereby request and authorize New Windsor Cable TV, Inc. to freeze the Preferred Carrier on my account on each of the following services as of this date. I understand I will not be able to change my carrier selections unless I lift the freeze. I understand there is no charge to initiate and terminate this service, and that there will be a charge to change carriers.

Local Telephone Service \_\_\_\_\_ (Signature)

IntraLATA Toll Service \_\_\_\_\_ (Signature)

InterLATA Toll Service \_\_\_\_\_ (Signature)

International Toll Service \_\_\_\_\_ (Signature)

ACCOUNT NAME \_\_\_\_\_ (Please Print)

Date \_\_\_\_\_