



# Melrose Telephone Company

224 E Main St  
320-256-7471

PO Box 100  
800-554-0185

Melrose MN 56352  
Fax 320-256-7555

## CABLE TV SERVICES ONLY

### CUSTOMER INFORMATION

Billing Name: \_\_\_\_\_ Billing Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Daytime Phone Number: \_\_\_\_\_

911 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### CREDIT INFORMATION

Last or Present Phone Number: \_\_\_\_\_ Telephone Company: \_\_\_\_\_

Previous Address: **(Required)** \_\_\_\_\_

Applicant #1 Name: \_\_\_\_\_ Date of Birth: **(Required)** \_\_\_\_\_

Place of Employment and Phone Number: \_\_\_\_\_

Applicant #2 Name: \_\_\_\_\_ Date of Birth: **(Required)** \_\_\_\_\_

Place of Employment and Phone Number: \_\_\_\_\_

Nearest Relative & Phone Number: \_\_\_\_\_

### INSTALLATION INFORMATION

Is this a New structure:  Yes  No

Do you own or rent at this location?  Own  Rent

If renting, name of landlord & phone number: \_\_\_\_\_

Directions to location: \_\_\_\_\_

### INSIDE WIRE PROTECTION PLAN

We offer a protection plan whereby we will provide all maintenance to locate and repair any damaged inside wires connected to your diversiCOM equipment. You will be billed at a monthly rate of \$.75.

- I choose to enter the Inside Wire Protection Plan
- I choose **not** to enter the Inside Wire Protection Plan. I assume full responsibility for maintenance of my inside wiring. I understand that you charge for repair of my inside wiring at \$75.00 per hour plus materials.

#### OFFICE USE ONLY

Acct. Number: \_\_\_\_\_ Rec'd Date: \_\_\_/\_\_\_/\_\_\_ Int: \_\_\_\_\_

Deposit: \$ \_\_\_\_\_ P/O Date: \_\_\_/\_\_\_/\_\_\_ Int: \_\_\_\_\_

BD Data: \_\_\_\_\_ Deposit Letter: Office/Mailed Receipt #: \_\_\_\_\_ Deposit Policy : Yes/No

Footage: \_\_\_\_\_ From \_\_\_\_\_ Type: \_\_\_\_\_ Welcome Letter: Yes/No

## CABLE TV SERVICES

Video service is not available in all areas. Please contact business office for availability. Some restrictions may apply.

### Cable TV Services

- Basic \$14.95/month  
 Expanded \$42.95/month  
 Premier \$52.95/month

### Movie Channels-----Sold in Sets

- HBO 1 for \$12.00/month  
 Cinemax 2 for \$22.00/month  
 Starz Superpack 3 for \$32.00/month

### Set Top Boxes

- \*One included in package  
\*Each additional box is \$4.95/month  
# of boxes/TV's: \_\_\_\_\_ (Max. of 3)

### Caller ID (Must have dial tone service)

- Yes - I would like Caller ID to show on my TV screen

**\*Must have caller ID feature on your phone line for the caller ID to appear on your TV screen.**

**Please see Features for Caller ID options.**

### Packages (Must have dial tone service to be in a package)

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> <b>Starter \$52.95/month</b> | <input type="checkbox"/> <b>Classic \$82.95/month</b> | <input type="checkbox"/> <b>Family \$99.95/month</b> | <input type="checkbox"/> <b>Ultimate \$144.95/month</b> |
| Phone Line  | Phone Line  | Phone Line   | Phone Line  |
| 30 min.-free LD**                                     | 60 min.-free LD**                                     | 90 min.-free LD**                                    | 120 min.-free LD**                                      |
| Expanded Video  | Expanded Video  | Premier Video  | Premier Video   |
| Modem Rental  | HS Internet 256/128k*                                 | HS Internet 512/256k*                                | HS Internet 1.5M/512k*                                  |
| 1 Set-Top Box   | Modem Rental  | Modem Rental   | All Movie Channels                                      |
|   | 1 Set-Top Box   | 1 Set-Top Box  | Modem Rental  |
|   |   |  | 1 Set-Top Box   |

\* High Speed Internet requires 18 month contract.

\*\* diversiCOM Long Distance service required.

\*\*\* Taxes and fees not included in package pricing.

\*\*\*\* Must complete ADSL application for High speed.

## ACCOUNT PASSWORD SET UP - REQUIRED

Due to the new CPNI FCC rules, if you request account information you must supply the below password before the information can be disclosed. If you don't remember the password, the backup security questions below will be used for verification and a new password can be established. If a password can not be supplied for call detail information, there are only a few ways mandated by the FCC in order to obtain the information:

- Have the customer service representative (CSR) call you back, but only at the telephone number of record.
- Have the CSR mail you the requested call detail information, but only to the address of record.
- You, the authorized account customer, must come in to the business office and show your valid government issued photo ID.
- One Form must be completed per account, therefore if there are more than one authorized account contact on the account, this password will be for all authorized account contacts.

### PASSWORD: \_\_\_\_\_

*Note: The password can not be historical or biological information such as your social security number, address, mother's maiden name, etc. The FCC is trying to minimize the possibility of false identification for supplying call detail, therefore do not use anything that someone else would be able to access.*

**BACKUP SECURITY QUESTIONS:** Choose **two** security questions and fill in the answer. This will be used to verify you as the authorized customer if the password can't be remembered. Once you answer the question(s) to our CSR, a new password can be re-established. (If your password is ever changed, you will receive a "Notice of Change/Activity" at the address of record from our office. The notice will inform you of such change or activity and if this is not made by the authorized person, please contact our office immediately).

1. What is your favorite season? \_\_\_\_\_
2. What is your favorite color? \_\_\_\_\_
3. What high school did you attend? \_\_\_\_\_
4. What was your first childhood pet's name? \_\_\_\_\_
5. What is the month and day of your father's birthday? \_\_\_\_\_

## AUTHORIZED ACCOUNT CONTACTS

To comply with the new FCC rules regarding Customer Proprietary Network Information (CPNI) we can only discuss certain account information and call detail with such authorized contacts.

Please list below the name(s) of whom you would like to add as Authorized Account Contact(s) to your account at this time:

Main Authorized Account Contact: \_\_\_\_\_

Additional Authorized Account Contact: \_\_\_\_\_

Additional Authorized Account Contact: \_\_\_\_\_

\*Anyone listed in the billing name will be an Authorized Account Contact and will have permission to access CPNI information on your account.

**SERVICE AGREEMENT SIGNATURE - REQUIRED**

Please read and sign application for service. This application becomes a contract when accepted in writing by Melrose Telephone Company (I certify that I am at least 18 years of age). I certify that the information stated in this application is true and correct to the best of my knowledge. I authorize Melrose Telephone Company to check my credit; a deposit may be required. (A copy of your credit report is available upon request.)

All equipment, not purchased, shall remain the property of Melrose Telephone Company. I understand that if I am renting/leasing equipment, during this time Melrose Telephone Company will maintain the equipment. Melrose Telephone Company will not be responsible for any special, incidental, or consequential damages for loss, damage of expense directly or indirectly arising from the customer's inability to use the equipment nor will they be responsible for any damages caused to the equipment due to customer negligence. I will be liable for any charges to repair the equipment. **Important: While leasing equipment, please keep all boxes, paperwork, CD's, etc... for the equipment.** If service is terminated, all equipment must be returned to Melrose Telephone Company within 15 days of termination. If equipment is not returned, I understand that I will be liable for the cost of such equipment.

**Installation charges (excludes special wiring & equipment), partial month of service and first full month of service will appear on your first bill. (All charges are subject to change.) A minimum of one month's service will be charged on all services.**

*installed.*

I assume all responsibility for all charges for this service. I understand that if I default on payment, my service will be subject to disconnection.



**Authorized Account Signature** \_\_\_\_\_ **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

*I understand by signing this agreement, that if I am not at location at time of installation, CPNI (Customer Proprietary Network Information) may be given to person(s) at location.  
Note: A Customer Service Representative will contact you to schedule an install date & time.  
A responsible adult must be at location during installation.*

**AUTOPAY**

I authorize Melrose Telephone Company and the financial institution name below to initiate entries to my checking/savings account or credit card. This authorization will remain in effect until notify Melrose Telephone Company in writing at least 30 days before or prior to the date I wish to cancel automatic payment service. I understand that Melrose Telephone Company will discontinue this service if I have two payments returned due to insufficient funds during a 12-month period.

Name of Financial Institution
:   :
Routing Number – located in the lower left of your check
PLEASE attach an unsigned check marked "VOID" with complete account number and financial institution name indicated.
<input type="checkbox"/> Checking <input type="checkbox"/> Savings

Card Type (please circle):
 
Card Number _____
Expiration Date ____/____/____
V Code (Last 3 digits on back of card) _____

**Authorized Account Signature** \_\_\_\_\_ **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

(Sign here for Auto pay)

Business office use only:  
Date Rec'd \_\_\_\_/\_\_\_\_/\_\_\_\_  
Date Entered \_\_\_\_/\_\_\_\_/\_\_\_\_  
Telephone Number \_\_\_\_\_  
By \_\_\_\_\_

## IMPORTANT NOTICE ABOUT YOUR ACCOUNT

Recent changes in federal law allow us to use information from your current records to market and advise you of new products and services that may satisfy your communications needs, unless you notify us otherwise.

### What is this "information"?

It is information, called "Customer Proprietary Network Information or "CPNI", relating to the telecommunications services you currently are buying from us.

### How can we use this information?

This information can be used to advise you about innovative communications services or new communications technology and products. We DO NOT sell or in any way provide this information to any other company other than the 911 records we are required by law to provide if you are a telephone customer.

### Who will be able to use this information?

Only diversiCOM Melrose Telephone Company or it's subsidiary companies diversiCOM Mainstreet Communications, LLC and Wisper High Speed Internet.

### Will diversiCOM protect my information?

YES! You have the right, and we have the duty, under federal law, to protect the confidentiality of this information. Therefore, regardless of whether you consent or not to allowing us to continue providing you with marketing and educational mailings, your account information will be treated confidentially.

### What action is necessary on my part to show consent?

No action on your part is necessary. If you do not contact us with in 30 days and indicate that we may not use the information to continue providing you with marketing and educational mailings, we will continue to do so.

### What if I do not consent?

You can contact us using the contact information below and indicate that you are withdrawing your approval of our use of your CPNI. You will not receive company information from us at that point. You may miss the opportunity to learn of new, innovative service proposals, new packaging that could reduce your monthly bill, new lower rates on services such as long distance and other information that keeps you informed of the happenings of your local company.

### If I consent, can I change my mind?

Yes. You can contact us at any time. Until you do so, your consent is valid.

**Contact Information:** diversiCOM Office: 256-1001, 597-1001, 764-1001  
By e-mail: [cpni@meltel.com](mailto:cpni@meltel.com)  
On our Web site: [www.meltel.com](http://www.meltel.com)

## INFORMATION REGARDING DTV TRANSITION

On February 17, 2009 full-power analog broadcasting will end and analog-only televisions may be unable to display full-power broadcast programming unless the viewer takes action. Viewers can get more information on the transition by going to [www.DTV.gov](http://www.DTV.gov) and more information about the DTV converter box coupon program by going to [www.DTV2009.gov](http://www.DTV2009.gov) or calling the NTIA at 1-888-388- 2009 (1-888-DTV-2009).

After February 17, 2009 a television receiver with only an analog broadcast tuner will require a converter box to receive over-the-air broadcast with an antenna. Analog-only TVs should continue to work as before with cable and satellite TV services, gaming consoles, VCRs, DVD players and similar products.

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