

Kalida Telephone Company, Inc.
Application for Internet Service & 911 Emergency Line

Date _____ Number: 419-532- _____ Cell No. _____

Name _____ Social Security # _____

Billing Address _____ City/State/Zip _____

Street Address _____ Date of Birth _____

Place of Employment _____ City/State _____

Spouse's Name _____ Spouse's Cell No. _____

Spouses's Employment _____ City/State _____

Active E-Mail Address _____

Date To Start Service _____

Type of Dwelling ___ House ___ Mobile Home ___ Apartment Do You ___ Own or ___ Rent?

Landlord's Name & Phone Number _____

Please fill out the info below.

This will be for a new e-mail address ending in @bright.net.

- | <u>Triple Play</u> | <u>Double Play</u> |
|--------------------|--------------------|
| ___ 50 Mb/50 Mb | ___ 25 Mb/25 Mb |
| ___ 100 Mb/100 Mb | ___ 50 Mb/50 Mb |
| ___ 200 Mb/200 Mb | ___ 75 Mb/75 Mb |
| ___ 300 Mb/300 Mb | ___ 100 Mb/100 Mb |
| ___ 500 Mb/500 Mb | ___ 150 Mb/150 Mb |

_____ User Name / Email Address – 3 to 24 characters

_____ Alternate User Name – Used if first choice is taken.

_____ Email Password – 6 to 8 characters – case sensitive

Wi-Fi Password: _____
 (If you want one.) At least 8 characters – case sensitive

Comments:

Signature _____

OVER

Office Use Only	
_____	NISC SB/JW/JG
_____	SO #
_____	Review SB/JW/JG
_____	Phone Book
_____	Number Book
_____	911
_____	Directory Assistance
_____	Date Installed

Please check one: _____ Listed _____ Unlisted (65¢ per month)

If Listed write name and address as you want it to appear in the telephone book.

Name _____

Address _____ City: _____

Number _____ 419-532- _____