

Fiber Application for Broadband Services

Name & Billing Address:						
DOB:	_ Your Social Security # or Tax Id #					
Joint Applicant Name:	Joint Applicant Social Security #					
Joint Applicant DOB:	Physical Address (911):					
Primary #	Alternate C	ontact Name &	.#			
County	_Bill Method,	Choose one.	Paper (\$5	.00/month)	Email and e-Bill	
Employer		Employment D)ate	_ Employer's	Phone #	
List all individuals (other th	an applicants	<u>above)</u> you aut	horize to make	changes or di	scuss information regarding	
your account:						
(Name, phone #, relations	hip to you)		(Name, phone	e #, relationsh	ip to you)	
Do you rent or own the se	vice location?	P □ Rent □ Ov	vn If rent, ple	ase attach a	landlord permission form.	

Download	Residential	Business	(Waived)
Speeds	Monthly Rate	Monthly Rate	Standard Installation
O 150M	\$55.00	\$105.00	No Contract \$250.00
O 300M	\$65.00	\$115.00	1 Year Creat = 01 \$150.00
600M	\$75.00	\$125.00	2 Year Contract \$108.00
O 1G	\$95.00	\$145.00	-

The residential plans include CPE & Dynamic IP and trouble requests will be completed within 48 business hours. The business plans include CPE, one Static IP, and optional bridged access and trouble requests will be completed within 24 business hours.

Standard Installation - Standard Installation - Includes up to 75 ft. of cable, installation and alignment of CPE, and configuration of Mark Twain provided wireless router. Mark Twain will also assist the customer with connecting devices to the router while onsite. Access to Mark Twain provided equipment is not granted to the subscriber. If changes or modifications are required, then the subscriber must contact Mark Twain for assistance.

Static IP Address - \$9.95/month (one included in Business Plans) Service Order Charge - \$10.00 (applies to any account changes)

Agreement – By applying for services from Mark Twain Communications Company (MTCC), I acknowledge I have read and agree to be bound by all acceptable use policies and terms & conditions of service. All policies may be amended as posted on our web site. I agree that I will be responsible for any and all damages or loss to the equipment and that equipment will be returned immediately upon termination of this service or at any time upon the request of MTCC. I authorize MTCC to run a soft credit check to determine if a deposit is required. I agree that MTCC shall not be liable for any loss, damage or expense of any kind. I agree all above speeds are **Up To Speeds** and may be slower due to customer location or network congestion during peak hours. (Office Hours are Mon - Fri 8:00 am - 4:45 pm) Office number 660-423-6822.

More Information on the other side!

Service Commitment – Applicants understand that when applying for Broadband Service through Mark Twain they are bound to a twelve (12) month service commitment. Applicant agrees to pay the remainder of the term, plus the Early Termination fee of \$250.00 upon discontinuation of service for any reason, should service be discontinued or moved at any time prior to the completion of your commitment. After the term has expired the subscriber will no longer be under any commitment. In the event a subscriber chooses to disconnect service then all Mark Twain equipment must be returned immediately. Non-Returned equipment will result in a \$200.00 charge.

Express Written Consent – You agree, in order for us to service your account or to collect any amounts you may owe, we may contact you by telephone at any telephone number associated with your account, including wireless telephone numbers, which cold result in charges to you. We may also contact you by sending text messages or emails, using any email address you provide us. Methods of contact ay include using pre-recorded or artificial voice messages and/or the use of an automatic dialing device, as applicable.

I/We have read this disclosure and agree that Mark Twain Communications Company may contact me/us as described above.

NOTE: Company reserves right to request a deposit and to add 30% collection costs to all past due accounts.

Authorized Signature		Date
*Joint Authorized Signature		Date
*!f	ioint application, both applicants must	sign

*If joint application, both applicants must sign!

Upfront Payment: Amount due at time of submitting application \$_____

Please fill out the required Customer Proprietary Network Information (CPNI) below and share with your authorized users to enable them access to your information.

Favorite (circle one): Color, Sport, Teacher, Pet, Name of High School, or Childhood Friend

Answer:

Account Password:

What e-mail address should we use to contact you for important information about your account, planned outages, etc? We <u>will not</u> use this address for advertising or share with others.

@
A Mark Twain e-mail account is not required.
Please Specify a <u>USERNAME</u> : (2-13 letters and/or numbers, please print clearly). Your username will be the letters preceding the @ sign in your e-mail address.
Please Specify a <u>PASSWORD</u> : (6-13 letters and/or numbers, please print clearly).
Secondary Security Check:(For example: mother's

Mark Twain Communications Company

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