



Buggs Island Telephone Cooperative

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<http://www.bitbroadband.com>

NEW TELEPHONE INSTALLATION FORM – RESIDENTIAL/BUSINESS

Account # _____ Contact Number _____ Email _____

Full Legal Name _____

Date Of Birth _____ SS/TAX ID (EIN)# _____ Drivers License# _____

911 Service Address _____

Service City _____ Service State _____ Service Zip _____ Service County _____

Billing Address _____

Billing City _____ Billing State _____ Billing Zip _____

Own _____ **Rent _____

**If Renting: Landlord Name & Phone Number _____

Landlord Address _____

Spouse (Other Name On Account) _____

Spouse Contact # _____ SS# _____ Spouse Drivers License# _____

Have You or Your Spouse Had Service with Us Before? _____ Previous # _____

Employer: _____ Work # _____

Next of Kin (Not Living with You) _____ Contact # _____

Has there been service at this address before? Yes ___ No ___ If no, is electric run to the house? Y ___ N ___

Where is your electric meter located? Side of the house ___ On a pole ___ Other ___ How far from the house? ___

Do jacks need to be installed? Yes ___ No ___ If yes, how many: _____

Subdivision: _____ Lot #: _____ House type/color _____

Long Distance Carrier (optional): _____ (BIT Long Distance Rate is 9.9¢ a minute)

■ Unlimited Long Distance with Caller ID/Call Waiting: \$49.95 + tax/mo _____

*(This is a 1 yr Contract) * Available to residential service only

Telephone Number: _____ Published ___ Non-Published**(\$1.25/mo) ___ Non-Listed**(\$1.25/mo) ___

**Non-Published: not listed in Directory or available from 411. • Non-Listed: not published in Directory but WILL be available from 411.

**If Non-Published, your name and number will not show up on Caller ID

Inside Wire Maintenance Plan: \$3.99/mo (Residential Only) (requires pre-inspection of house wiring) Yes ___ No ___

~Phone Features/Blocks: _____

PAYMENT OPTIONS: eBill _____ Automatic Draft _____ Auto Credit Card Draft _____ Mail _____

Installation Charges:

Service Order	\$10.00	_____
Line Connection	\$10.00	_____
Premise Visit	\$30.00	_____ <i>Waived with DSL installation</i>
Taxes	\$	_____

Security Deposit Total: _____ Date Paid: _____

I understand that my security deposit will be refunded to me after twelve (12) consecutive months of satisfactory credit without any late notices or returned checks. If a late notice, payment arrangement or return check is issued against my account I understand that the twelve (12) month period will start again from that date.

Initial _____

***If requesting eBilling, Please complete the following:**

Username: _____

Password: _____

Email: _____

You will receive an email to confirm your email address BEFORE you can access the eBill website.

Please watch for this email. It may end up in your SPAM folder, so please remember to check there.

CPNI: Opt-Out _____

CPNI is a communications industry abbreviation that stands for Customer Proprietary Network Information. CPNI refers to your telephone service, including the charges on your bill, the services you subscribe to, and your usage data and calling patterns. In short, it is your private information about your communication services.

The Federal Communications Commission (FCC) has mandated CPNI 'must comply' rules for all telecommunications companies. The rules are designed to safeguard your information from anyone who is not authorized to have access to your account.

1. Each time you call BIT to speak with a customer service representative regarding your account, we will be required to ask for your secure password. If you cannot remember the password, we are required to ask a verification question, and you will be required to provide an appropriate answer to the question to ensure we are speaking with an authorized contact on your account.

2. Once authorization has been established, we can discuss information about specific calls that you have made after you provide the date of call, length of call and call destination. If you are unable to provide specific details, we can send a copy of this information to the account address on record.

3. If you stop by any BIT office to make account inquiries, you may be required to show personal photo identification before we can discuss or release any account information.

4. You may add up to four authorized contacts. In order to protect your information, only these authorized contacts will be allowed to make inquiries or changes to your account. Inquiries or requests from other parties, including those of a spouse, cannot be honored if they are not an authorized contact or listed on the account. If you are uncertain who is an authorized contact on your account, please contact your local office for clarification.

Security CPNI Password: _____

Security Questions: (please choose ONE)

1. What city were you born? _____

2. What is your favorite color? _____

3. What kind was your first car? _____

4. What was the name of your first pet? _____

5. What was the name of the high school you attended? _____

Authorized Contacts:

1. _____ **2.** _____

3. _____ **4.** _____

Customer Signature: _____

Date: _____

Customer Service Representative: _____

Date: _____

Buggs Island Telephone Cooperative is an equal opportunity provider and employer.