



# RESIDENTIAL

353, 824, 827 Phone

[ ] (1 year contract)

2351 N. Main, Box 38  
 Craigville, IN 46731  
 Phone: 260.565.3131  
 Fax: 260.565.3535  
[www.adamswells.com](http://www.adamswells.com)

FIRST NAME <small>PRINT name as you want it to appear in phonebook</small> LAST NAME Present or Previous Customer <input type="checkbox"/> Yes <input type="checkbox"/> No			BILLING NAME (IF DIFFERENT)		
SERVICE ADDRESS			BILLING ADDRESS (IF DIFFERENT)		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
New or Port Phone #			ALT. PH:		

## SELECT ONE:

- Line only \$21.95 w/tax + fees
- Line w/ purchased TV/HSI \$17.95 w/taxes + fees
- Package 100 \$24.95 w/tax + fees  
100 Min. Long Distance
- Package 250 \$29.95 w/tax + fees  
250 Min. Long Distance
- Package 500 \$39.95 w/tax + fees  
500 Min. Long Distance

**PHONE PACKAGES INCLUDE:**

Caller ID (# only) call waiting & 3-way calling

**ADVANCE PAYMENT REQUIRED**  
 \$49.00 Activation Fee plus 1<sup>st</sup> month  
**NON REFUNDABLE**

### LONG DISTANCE PKGS.

Charges on OUTGOING calls only

- 100-\$4.95
- 250-\$11.95
- 500-\$21.95
- 750-\$31.95
- 1000-\$39.95
- 1500-\$61.90
- 2000-\$79.90
- International Calling

\_\_\_\_ Long Distance Carrier

### EXTRA FEATURES

- \$4.95-Extended Calling Plan (Ossian, Uniondale, Tocsin & Preble)
- \$7.50-Caller ID (Name & #)
- \$4.00-Add Caller ID#/Name \$4.00
- \$4.95-Voice Mail (Password 4-7 #S) \_\_\_\_\_
- \$2.00-Call Forward
- \$4.95-Service Call Protection Plan
- \$9.95-Equipment + Service Call Protection Plan
- \$1.00 - NP/NL Number  
 Unblock Caller ID
- BATTERY BACKUP (Phone)

### CHARGES AFTER INITIAL INSTALL

Time and Material - \$60 per hour  
 Service Call - \$30 per 1/2 hour

Any features changed after the initial install date - \$10 service charge.

Standard completion date is approximately **10 BUSINESS DAYS** from the first business day after fees are processed

**BILLING TYPE:**  Paper Bill  Electronic checking (10<sup>th</sup> of month)  Online/Paperless (Customer Set up Required)

I affirm that I am legally qualified to contract for service and have attained the age of at least 18 years. I acknowledge that I accept and agree to the "Service Agreement and Service Terms and Conditions", and that the company is NOT responsible for damage to non-located utility services (gas, electric, water/sprinkler systems, cable TV). I agree to a 1-year contract. \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please list all additional names of persons having access to this account

Own  Rent LANDLORD NAME / # \_\_\_\_\_

OFFICE USE ONLY	
TAXES & SURCHARGES SUBJECT TO CHANGE	
SERVICE	\$
INDIANA 911	\$1.00
IN Tele-Relay	\$0.03
(Federal/State) 10% Tax	\$
IN Universal Svc Fund	\$
Add. Service Charge	\$
	\$
<b>TOTAL MONTHLY FEE</b>	\$
(\$49.00) Activation Fee	\$
<b>TOTAL DUE</b>	

**OFFICE USE ONLY (rev. 9/20/16cv)**

Fiber Area \_\_\_\_\_  
 Calix Address \_\_\_\_\_  
 MDF \_\_\_\_\_ EQN# \_\_\_\_\_  
 Switch Work \_\_\_\_\_ Data \_\_\_\_\_  
 ANPI \_\_\_\_\_ NeuStar Confirm \_\_\_\_\_  
 Magic Mail \_\_\_\_\_ Data Base \_\_\_\_\_  
 Video \_\_\_\_\_ Activation Code \_\_\_\_\_  
 PORT Date: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 LOOP Disconnect Date: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 DSL Modem Returned: \_\_\_\_\_

Final Install Date: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Circuit ID \_\_\_\_\_ Leg \_\_\_\_\_  
 \_\_\_\_\_ Photo ID Checked (Per FCC ruling a photo ID must be provided)