



Craigville RESIDENTIAL

565 Phone

2351 N. Main, Box 38
 Craigville, IN 46731
 Phone: 260.565.3131
 Fax: 260.565.3535
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
VALID OR NEW EMAIL ADDRESS (3-16 characters, letters and numbers only, lower case, no spaces) @adamswells.com			PASSWORD (5-44 LETTERS/NUMBERS)		ALT. PH: NEW or PORT #:
NOTE: The email address will also be your USERNAME.					

SELECT ONE:

Line only 29.98 (tax)

Pkg. 100 \$33.48 (tax)
100 Min. Long Distance

Pkg. 250 \$38.48 (tax)
250 Min. Long Distance

Pkg. 500 \$48.48 (tax)
500 Min. Long Distance

PHONE PACKAGES INCLUDE:
 Caller ID (Name & Number) Call Waiting &
 3 Way Calling

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

**ADVANCE PAYMENT
 REQUIRED**

**\$49.00 Activation Fee plus 1st month
 (NON REFUNDABLE)**

EXTRA FEATURES (per month)

\$7.50 - Caller ID (Name & Number)
 \$4.00 - Add Caller ID Number OR Name
 \$4.95 - Voice Mail
 (Password 4-7 #'S) _____
 \$2.00 - Call Forward
 \$1.00 - NP/NL Number
 Unblock Caller ID
 \$4.95 - Service Call Protection Plan
 \$9.95 - Equipment + Service Call
 Protection Plan
 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 will be - \$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 (10th 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 (rev. 4/12/17cv)

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)

OFFICE USE ONLY	
TAXES & SURCHARGES SUBJECT TO CHANGE	
SERVICE	\$
FEES	\$
IN Universal Svc Fund	\$
Fed Universal Svc Fund	\$
(Federal/State) 10% Tax	\$
SUB TOTAL	\$
\$49.00 Activation Fee	\$
TOTAL DUE	\$