



HSI Residential-Internet

2351 N. Main, Box 38
 Craigville, IN 46731
 Phone: 260.565.3131
 Fax: 260.565.3535
 www.adamswells.com

[(1 YEAR CONTRACT)]

Present or Previous Customer <input type="checkbox"/> Yes <input type="checkbox"/> No			BILLING NAME (IF DIFFERENT)		
FIRST NAME		LAST NAME			
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)			PASSWORD (5-44 LETTERS/NUMBERS)		ALT. PHONE #
@adamswells.com					PHONE#

MANAGED WI-FI INFORMATION

SSID / Wireless Name _____ Password (at least 8 characters) _____

FIBER AREA

(Data CAP 1 TB**)

- \$42.95 25 Mb/25 Mb
- \$54.95 50 Mb/50 Mb
- \$74.95 100 Mb/100 Mb
- \$104.95 1 Gb/100Mb
- \$179.95 1 Gb/1 Gb

WIRELESS ROUTER

- \$7.95 Managed Wi-Fi *
- \$4.00 Mesh Extender
- Wireless Router _____
- Customer Provided Router
- \$49.00 TECH Install/Activation

ADVANCE PAYMENT REQUIRED
 Activation/TECH Install Fee plus 1st month service
(NON-REFUNDABLE)

**DATA CAP: Maximum 1TB –
 Overage \$.25 per Gb Maximum
 overage fee of \$50.00

*Only Available for Home Owners

Extra Features

- \$1.50 Spam X (required if using AdamsWells Email address)
- \$4.95 Email Only
- \$3.00 X-Stop Content Filter
- \$4.95 Service Call Protection Plan
- \$9.95 Equipment + Service Call Protection Plan
- \$10.00 Static IP (Used for?)
 Server__ VPN__ Mail__ Other__

Ask About

- SecureIT Antivirus
- Online Backup

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 / # _____

CHARGES AFTER INITIAL INSTALL

Time and Material - \$60 per hour
 Service Call - \$30 per ½ hour

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

OFFICE USE ONLY

TAXES & SURCHARGES SUBJECT TO CHANGE

INTERNET SERVICE	\$
SERVICE OPTIONS	\$
TOTAL MONTHLY FEE	\$
Wireless Router + Tax	\$
ACTIVATION FEE	\$
TOTAL DUE	\$

OFFICE USE ONLY (rev 2/14/2023 BJ)

Fiber Area _____
 Calix Address _____
 MDF _____
 Data _____
 Data Base _____
 Magic Mail _____
 X-Stop _____

Final Install Date: ____-____-____
 Circuit ID _____ Leg _____

____ Photo ID Checked (Per FCC ruling a photo ID must be provided)