

CUSTOMER INFORMATION (WHERE THE SERVICE IS LOCATED)

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
SOCIAL SECURITY # _____
FEDERAL ID # _____ DUNS# _____
OWNER/PRESIDENT NAME: _____

BILLING INFORMATION (MUST BE COMPLETED)

E-MAIL ADDRESS: _____
EBILL PASSWORD: _____ (10 CHARACTERS MAX)
CONTACT NAME: _____
CONTACT ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
CONTACT PHONE # _____
ESTIMATED USAGE: _____

~~CREDIT REFERENCES (FOR BUSINESS CUSTOMERS ONLY - YOU MAY INCLUDE THE COVER SHEET FROM YOUR MOST RECENT LONG DISTANCE BILL INSTEAD)~~

~~TRADE REF: _____ CONTACT: _____ PHONE: _____
TRADE REF: _____ CONTACT: _____ PHONE: _____~~

CREDIT CARD PAYMENT (OPTIONAL) PLEASE CHARGE THIS CREDIT CARD FOR MY MONTHLY CHARGES - AN ITEMIZED CALL DETAIL REPORT WILL STILL BE SENT

CREDIT CARD: MC VISA AMEX DISCOVER NAME ON CARD: _____ SIGNATURE: _____
CARD NUMBER: _____ EXPIRATION DATE: _____ TODAY'S DATE: _____

SERVICES DESIRED (CHECK ALL THAT APPLY) ~~BUSINESS ACCOUNT~~ **RESIDENTIAL ACCOUNT**

- POWERONE (1+) LONG DISTANCE** ACCOUNT CODES? Yes No VERIFIED? Yes No (# OF CODES: _____ # OF DIGITS _____)
- POWER 3000™ LONG DISTANCE (RESIDENTIAL CUSTOMERS ONLY)** PHONE NUMBER: _____ PHONE NUMBER: _____
- INTRALATA TOLL SERVICES** THIS CHANGE APPLIES TO LOCAL IN-STATE TOLL-CALL CHARGES ONLY, NOT LOCAL SERVICE - CUSTOMER INITIALS _____
- 800#** EXISTING 800# New 800# EXISTING 800# CARRIER: _____ EXISTING 800#: _____
RING TO NUMBER FOR 800#: _____ NOTE: EXISTING 800# WILL REQUIRE A SEPARATE RESP ORG FORM
- POWERCONNECT INTERNET** **POWERCONNECT HIGH SPEED INTERNET** **LOCAL ACCESS #** _____
OPERATING SYSTEM: WINDOWS 95/98/ME WINDOWS 2000 WINDOWS NT MACINTOSH - MAC OS VERSION _____
USERNAME DESIRED: _____ **PASSWORD DESIRED:** _____
(20 CHARACTER MAXIMUM - YOU WILL BE CONTACTED IF UNAVAILABLE) (6 - 8 ALPHANUMERIC CHARACTERS)
- CALLING CARDS** # OF CARDS REQUESTED _____ PIN # _____ PIN # _____ PIN # _____
- POWERDIAL (1-888-30-30-730 - ACCESS TO LOWER RATES)** PHONE NUMBER: _____ PHONE NUMBER: _____
- POWERCONFERENCE™** - PLEASE FILL OUT POWERCONFERENCE MODERATOR SHEET

MAIN BILLING TELEPHONE NUMBER: _____ PLEASE LIST ADDITIONAL NUMBERS ON THE ADDITIONAL LINE APPLICATION

ADDITIONAL TELEPHONE NUMBERS: _____

AUTHORIZATION FOR CREDIT CHECK - TERMS & CONDITIONS (SEE REVERSE FOR ADDITIONAL TERMS & CONDITIONS)

VIEW FULL TERMS & CONDITIONS AT [HTTP://WWW.POWERNETGLOBAL.COM/CORPORATESITE/SERVAGREE.PHP](http://www.powernetglobal.com/corporatesite/servagree.php)

- THIS ORDER IS SUBJECT TO CREDIT APPROVAL. THERE MAY BE A MONTHLY FEE FOR 800# SERVICE.
- TERMS AND CONDITIONS ARE SUBJECT TO STATE AND FEDERAL LAWS. INTRASTATE RATES VARY BY STATE
- CUSTOMER HEREBY AGREES TO ACCEPT FINANCIAL RESPONSIBILITY FOR ALL CHARGES ARISING FROM THE USE OF SERVICES ABOVE.
- IT IS MY RESPONSIBILITY TO NOTIFY POWERNET GLOBAL COMMUNICATIONS OF ANY LOST OR STOLEN CALLING CARDS.
- THE TERMS AND CONDITIONS OF SERVICE ARE AS STATED IN THIS BUSINESS/RESIDENTIAL SERVICES APPLICATION AND IN APPLICABLE TARIFFS.
- CUSTOMER UNDERSTANDS THAT ALL BALANCES ARE DUE UPON RECEIPT PAYABLE DIRECTLY TO PNG TELECOMMUNICATIONS, AND THAT ALL BALANCES OUTSTANDING AFTER 30 DAYS ARE SUBJECT TO A LATE CHARGE OF 1.5% PER MONTH.

LETTER OF AGENCY

- I AUTHORIZE POWERNET GLOBAL COMMUNICATIONS (PNG) TO BE MY PRESUBSCRIBED CARRIER FOR THE SERVICES AND TELEPHONE NUMBERS(S) DESIGNATED ABOVE, AND NO OTHERS. I UNDERSTAND THAT BY SIGNING THIS FORM, PNG WILL BECOME MY PRESUBSCRIBED CARRIER FOR EACH SERVICE SO AUTHORIZED. I FURTHER UNDERSTAND THAT I CAN ONLY HAVE ONE PRIMARY CARRIER FOR EACH SERVICE PER TELEPHONE NUMBER AND THAT I MAY INCUR A CHARGE FOR THIS CHANGE IN PRESUBSCRIBED CARRIER. I REPRESENT THAT I AM AUTHORIZED TO DESIGNATE THE PRESUBSCRIBED CARRIER FOR THE NUMBERS LISTED ABOVE, AND I AUTHORIZE PNG TO ACT AS MY AGENT IN SUBMITTING THIS AUTHORIZATION DESIGNATING PNG AS MY PRESUBSCRIBED CARRIER FOR EACH SERVICE ABOVE.
- YOU MAY CONFIRM THAT YOUR SERVICES HAVE BEEN CHANGED TO PNG BY CALLING 1-800-860-9495.

BY SIGNING YOUR NAME, YOU ARE STATING THAT ALL PRECEDING INFORMATION IS CORRECT AND THAT YOU FULLY AGREE TO THE TERMS & CONDITIONS.

SIGNATURE: _____ **PRINTED NAME:** _____ **DATE:** _____

THIRD PARTY VERIFICATION #: _____

RATE CODES (FOR AGENT USE ONLY) 1+LD **A45AMPF** 800# **E45AMPF** CALLING CARDS **T97AMPF** PC1068 PowerDial **PD57AMPF** CENTREX? Y N

AGENCY CODE **AMP** AGENT ID **AMP-2000006** PHONE 630-420-9326 FAX 928-438-9326