

\* Required Information



www.powernetglobal.com

Business & Residential Services Application

CUSTOMER INFORMATION (WHERE THE SERVICE IS LOCATED)

\* NAME: \_\_\_\_\_
\* ADDRESS: \_\_\_\_\_
\* CITY: \_\_\_\_\_ \* STATE: \_\_\_\_\_ \* ZIP: \_\_\_\_\_
\* SOCIAL SECURITY # \_\_\_\_\_
FEDERAL ID # \_\_\_\_\_ DUNS# \_\_\_\_\_
OWNER/PRESIDENT NAME: \_\_\_\_\_

BILLING INFORMATION

NAME: \_\_\_\_\_
ADDRESS: \_\_\_\_\_
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_
CONTACT PHONE # \_\_\_\_\_
BILLING CONTACT EMAIL: \_\_\_\_\_
\* ESTIMATED MONTHLY 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: [ ] MASTERCARD [ ] VISA [ ] AMERICAN EXPRESS [ ] DISCOVER 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 \_\_\_\_\_)
[ ] 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
[ ] 800# WITH PIN - 1(800) 860-4000 + 6 DIGIT PERSONAL IDENTIFICATION NUMBER
[ ] POWERDIAL (1-888-30-30-730 - ACCESS TO LOWER RATES) PHONE NUMBER: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_
[ ] CALLING CARDS - # OF CARDS REQUESTED \_\_\_\_\_ PIN # \_\_\_\_\_ PIN # \_\_\_\_\_ PIN # \_\_\_\_\_
[ ] POWERCONNECT INTERNET ACCESS (14.95/MONTH UNLIMITED DIAL-UP ACCESS) 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)

\* 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

- 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 IMPRESUBSCRIBED 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.
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 \_\_\_\_\_ 800# \_\_\_\_\_ CALLING CARDS \_\_\_\_\_ MRC \_\_\_\_\_ CENTREX? [ ] Y [ ] N
AGENCY CODE ARS AGENT ID ARS000010 PHONE 858-552-1360 FAX 858-777-5505

PLEASE SIGN & FAX IT TO 858-777-5505