

**KINGDOM TELEPHONE COMPANY APPLICATION FOR SERVICE**

800-487-4811 or 573-386-2241

Exchange \_\_\_\_\_ Date \_\_\_\_\_

1. Primary Applicant \_\_\_\_\_ Social Security No. \_\_\_\_\_  
 Date of Birth \_\_\_\_\_

Joint Applicant \_\_\_\_\_ Social Security No. \_\_\_\_\_  
 Date of Birth \_\_\_\_\_

**Are above applicants legally married to one another? (Y/N)**

**If above applicants are married to a person other than listed above, please complete spousal waiver form.**

2. Do you prefer a non-published telephone number with a monthly cost of 75¢? (Y/N) \_\_\_\_\_ (If yes, skip #3)

3. If you would like a listing in the directory, how should it be listed? (Extra listings are 50¢ per month per additional line)  
 Name(s) \_\_\_\_\_ Name \_\_\_\_\_  
 If listed, check one of the following listing formats:  
 Complete address \_\_\_\_\_ Name only listed \_\_\_\_\_ With city only address \_\_\_\_\_ With street only address \_\_\_\_\_

4. Previous mailing address and telephone number \_\_\_\_\_

5. Employer \_\_\_\_\_ Date of employment \_\_\_\_\_

6. Employer address \_\_\_\_\_ Phone number \_\_\_\_\_

7. Spouse's employer \_\_\_\_\_ Date of employment \_\_\_\_\_

8. Employer address \_\_\_\_\_ Phone number \_\_\_\_\_

9. What is the proper post office address for where your bill should be mailed?  
 House No., Street, Road, or P.O. Box No. \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

10. Is this a house? \_\_\_\_\_ Mobile home? \_\_\_\_\_ Give a brief description of outside dwelling \_\_\_\_\_

11. If construction, what is the approximate move-in date? If a mobile home, when will it be in place? \_\_\_\_\_

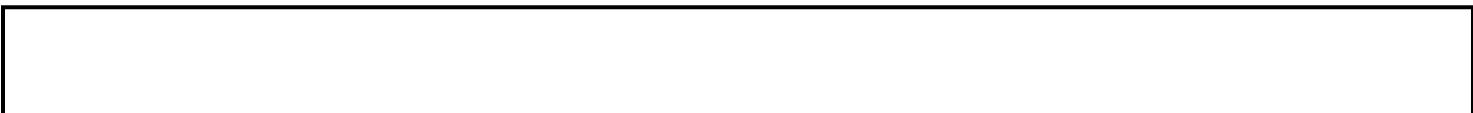
12. Do you own any outdoor dogs? \_\_\_\_\_

13. Who lived there before you? \_\_\_\_\_

14. What is your E911 address? House no. \_\_\_\_\_ Street or Road Name/No. \_\_\_\_\_  
 County \_\_\_\_\_ (E911 county address contact: Callaway 573-592-2496/ Montgomery 573-564-2283)

15. Who is your nearest neighbor? \_\_\_\_\_ Distance \_\_\_\_\_  
 Are you on the same side of the road as your neighbor? (Y/N) \_\_\_\_\_

16. At what contact number may we reach you concerning your telephone service? \_\_\_\_\_



| Initial Charges to Begin Service  | MONTHLY RECURRING RATES          |  | Advance Payment Required |
|---|----------------------------------|--|--------------------------|
|   | Kingdom Tel. Set Rates           | County/State Federal Chgs*             |                          |
| <b>Required Advance Payment for Non-Recurring Charges:</b>                |                                  |  |                          |
| Membership Stock (Refundable at disconnect)                               | \$10.00                          | *Sales & Excise Taxes are not included | \$10.00                  |
| Installation Charges (Non-refundable)                                     |                                  |  |                          |
| Existing Location _____ Requires Construction _____                       |                                  |  |                          |
| Deregulated Estimated Time & Materials (Non-refundable)                   |                                  |  |                          |
| Extra Deposit # - Current Interest Rate _____ %                           |                                  |  |                          |
| # Refundable with interest rate changing each December 1                  |                                  |  |                          |
| Extra Deposit: Local _____ LD _____ Internet _____                        |                                  |  |                          |
| <b>Advanced Payment for Recurring Monthly Basic Services:</b>             |                                  |  |                          |
| One-Party Rate (Includes Touch-Tone Service)                              |                                  |  |                          |
| Bill Number Screening for 3 <sup>rd</sup> Number & Collect Calls @ \$1.40 |                                  |  |                          |
| Tebbetts (295) Exchange Only – Jefferson City EAS                         |                                  |  |                          |
| Lifeline Low Income Support/Disability                                    |                                  |  |                          |
| Missouri Universal Service Charge   |                                  |  |                          |
| Federal Universal Service Charge  |                                  |  |                          |
| Federal End User Charge   |                                  |  |                          |
| County E911 Tax – Callaway _____ Montgomery _____ Audrain _____           |                                  |  |                          |
| Missouri Tax for Deaf Relay Services                                      |                                  |  |                          |
| Access Recovery Charge  |                                  |  |                          |
| <b>Advanced Monthly Payment for Optional Available Services:</b>          |                                  |  |                          |
| Service Assurance Plan @ \$2.95   |                                  |  |                          |
| Optional Service Features – See Note 1 on back of this form               |                                  |  |                          |
|   |                                  |  |                          |
|   |                                  |  |                          |
|   |                                  |  |                          |
| Voice Mail – Basic @ \$5.00   |                                  |  |                          |
| High Speed Internet   |                                  |  |                          |
| <b>CHECK _____ CASH _____</b>   | <b>TOTAL ADVANCE PAYMENT DUE</b> |  |                          |

**Important required information on reverse.**

**Kingdom Long Distance: Choose one option.**

**Option 1: EQUAL ACCESS LONG DISTANCE CARRIER OF CHOICE:**

Each of our customers has a choice of carriers for toll calls "outside of their LATA" and toll calls "within their LATA." The carrier(s) chosen become your primary toll carrier for "out-of-state interLATA calls" and/or your "state intraLATA calls."  
 YOU MUST CHOOSE YOUR TOLL CARRIER(S) FROM THE ATTACHED LIST AND INDICATE THOSE CHOICES ON THE LINES BELOW.

**CARRIER CHOICE (Out-of State & State InterLATA Long Distance Calling)\*\***

Carrier Name \_\_\_\_\_ Carrier Identification Number \_\_\_\_\_

**CARRIER CHOICE (State IntraLATA Toll Calling)\*\***

Carrier Name \_\_\_\_\_ Carrier Identification Number \_\_\_\_\_

AVERAGE MONTHLY TOLL SPENDING \$ \_\_\_\_\_

**To guarantee that you can make toll calls without interruption or extra charges, you must set up an account with the toll carrier you prefer. See contact number on the list of carriers included with the mailing of this application.**

**Option 2: TOLL BLOCKING (check one)**

- SECURE BLOCK – NO OPERATOR AVAILABLE - \$1.40 Monthly Charge. Able to call 911, local numbers & 800 numbers.
- LESS SECURE BLOCK – OPERATOR AVAILABLE\* - \$0.00 Monthly Charge. Able to call 911, local numbers & 800 numbers.

\* If the operator places a call, toll charges will accrue.

**DISCLOSURE UNDER FCC RULE 64.1509(b)**

Your local exchange and long distance service cannot be disconnected or interrupted as a result of your failure to pay charges for interstate pay-per-call service, charges for interstate information services provided pursuant to a presubscription or comparable arrangement, or charges you have disputed for interstate tariffed collect information services.

You can obtain blocking of access to services offered on 900 service access codes at no charge within 60 days after you subscribe to a new number and it becomes effective. Other requests for blocking and requests for unblocking may be subject to a reasonable one time fee. Our tariffs include the terms and conditions that apply.

You have a right not to be billed for pay-per-call services not offered in compliance with Federal laws and regulations established under Title II or III of the Telephone Disclosure and Dispute Resolution Act.

Your access to 900 services may be involuntarily blocked to failure to pay legitimate pay-per-call charges.

**YOU MAY HAVE ACCESS TO 900 SERVICES BLOCKED BY SIGNING AFTER THE BELOW PARAGRAPH.**

Please block all 900 services from my telephone service. I understand that there is NO CHARGE for this service if requested within 60 days from the date my service was installed.

Customer Signature \_\_\_\_\_

**ALL BLANKS ON FRONT AND REVERSE SIDE OF THIS FORM MUST BE COMPLETED. APPLICANT SIGNATURES BELOW ARE REQUIRED TO FINALIZE THIS APPLICATION.**

I am 18 years old or older. In making this application, I (we), the undersigned, agree(s) to the rules and regulations of Kingdom Telephone Company as set forth in the exchange tariff and to any general changes in the rules and regulations, tariffs, or rates for the services furnished under this application. This application becomes a contract when accepted in writing by Kingdom Telephone Company. As the applicant(s) for the above services and equipment, and for such services as may be ordered later, I (we) agree to pay the established applicable rates.

Customer Service Representative \_\_\_\_\_ Applicant (1) \_\_\_\_\_

Applicant (2) \_\_\_\_\_

**Accessibility**

Check this box if you have a hearing or speech disability or a condition that prevents or limits your ability to communicate over voice networks. Describe the nature of your disability or medical condition \_\_\_\_\_

**NOTE 1 – OPTIONAL AVAILABLE CALL FEATURES AND MONTHLY CHARGES:**

| BASIC  |         | ENHANCED                                  |        |
|--|---------|---|--------|
| Call Forward                                       | \$0.75  | Calling Party Identity                    | \$4.00 |
| Call Waiting                                       | \$0.75  | Automatic Call Back                       | \$2.00 |
| Cancel Call Waiting                                | \$0.50  | Automatic Recall                          | \$2.00 |
| Three-Way Calling                                  | \$0.75  | Customer Originated Trace                 | \$3.50 |
| Speed Calling – 8 Numbers                          | \$0.75  | Selection Call Rejection                  | \$2.00 |
| Speed Calling – 30 Numbers                         | \$1.25  | Selection Call Acceptance                 | \$2.00 |
| Automatic Line                                     | \$0.50  | Anonymous Call Rejection                  | \$2.00 |
| Single Party Line Revertive Ringing                | \$0.50  | Distinctive Ringing Call Waiting          | \$2.00 |
| Call Forward Remote Access                         | \$0.75  | Call Waiting/Caller ID (requires Call     | FREE   |
| Call Forward When Busy                             | \$0.75  | Waiting and Calling Party Identity)       |        |
| Call Forward If No Answer                          | \$0.75  | Privacy Control <b>OR</b> Do Not Disturb  | \$3.00 |
| Call Transfer                                      | \$0.50  | Privacy Control <b>AND</b> Do Not Disturb | \$5.00 |
| Voice Mail – Basic (Other options available)       | \$5.00  | <b>SERVICE RESTRICTIONS</b>               |        |
| Teen Service – (Personal number, unique ring)      | \$3.00  | Toll Access (All)                         | \$1.40 |
|  |         | Billed Number Screening                   | \$2.00 |
| <b>Select &amp; Save Bundle – call for details</b> | \$92.35 |   |        |