EASTEX TELEPHONE COOPERATIVE, INC.

APPLICATION FOR ADDITIONALTELEPHONE SERVICE - COMPLETE FRONT AND BACK

LINE ONE

Directory Name _____

Billing Name _____

Billing Address _____

Billing City, State, ZIP+4 _____

Directory Location _____

Directory Extra Listing _____

911 Address _____

In/Out City Limits Out City _____ County _____

LINE TWO

Directory Name- _____

911 Address _____

Other- _____

Group Bill ☐ Separate Bill ☐

First Telephone Contact No. _____

Second Telephone Contact No. _____

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Exchange _____ Member No. _____

Service Order No _____ Log No. _____ Cr. Class ___

Telephone No. 1 _____ 2 _____

☐ Lifeline ☐ Link-Up America

Bank Drafting? Yes ☐ No ☐ PIC Freeze? Yes ☐ No ☐

Long Distance Carrier / Local Carrier _____ / _____

Long Distance Plan _____

SERVICE RESTRICTIONS	LINE ONE		LINE TWO	
	ALLOW	BLOCK	ALLOW	BLOCK
Regular Toll (other than 800)				
800/888 Toll				
900 Toll				
950 Toll				
500 Toll				
Collect Calls				
Caller ID Display Per Line				
Customer Originated Trace				
International Toll				
Inside Wiring Maintenance ($1)				
Non-Published ($1)				

DIRECTIONS TO SERVICE LOCATION/SPECIAL INSTRUCTIONS

Last Occupant: _____

Nearest Neighbor: _____

Home Owner: _____

Type Structure: _____

Telephone Line to Structure? Yes ☐ No ☐

Physical Directions: _____

The undersigned (hereinafter called the "Applicant") hereby applies for membership in and agrees to take telephone service from Eastex Telephone Cooperative, Inc., a Cooperative, non-profit corporation existing under the laws of the State of Texas for the Purpose of furnishing telephone service, upon the following terms and conditions.

1. The Applicant will pay a membership fee of $10.00, plus installation fees.
2. The Applicant will, when telephone service becomes available, take from the Cooperative, telephone service to be used on his premises, and will pay therefore at rates to be determined from time to time in accordance with the bylaws of the Cooperative.
3. The Applicant will grant to the Cooperative a right-of-way easement to construct, operate and maintain a telephone line or system on the applicants property and in or upon all streets, roads or highways abutting said property.
4. The Applicant will comply with and be bound by all provisions of the charter and bylaws of the Cooperative, and such rules and regulations as may from time to time be adopted by the Cooperative.
5. The Applicant, by becoming a member, assumes no personal liability or responsibility for any debts or liabilities of the Cooperative and it is expressly understood that his private property is exempt from execution for any such debts or liabilities.
6. The Applicant agrees that the Cooperative, or its designee, is expressly authorized to investigate any references and other information furnished by the Applicant or by any other person or entity, pertaining to the Applicant's creditworthiness. The Cooperative may, at any time, and at its sole discretion, revoke the privilege of extending credit to the Applicant for future telephone services.
7. The Applicant agrees that this Application and any tariffs, terms and conditions, or other documents incorporated herein by reference (e.g., the Charter and Bylaws of the Cooperative) will be construed under the laws of the State of Texas and that venue will be fixed in state district court in Rusk County, Texas for the resolution of any and all types of claims or conflicts between Applicant and the Cooperative.
8. If any clause or provision of this Application is found to be invalid or is incapable of being enforced by any rule of law or public policy, all other clauses and provisions shall, nevertheless, remain in full force and effect.

This application is made in consideration of similar applications by others and is understood to be an agreement with such applicants.

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DATED _____

☐ Photo ID Verified

Witness: _____

Tax $ 0.00 (STATE _____) (CITY _____) (COUNTY _____)

Service Order Fee $ _____

Membership Fee $ _____

Line Connection Fee $ _____

Deposit Amount $ _____

Inside Wiring Installation $ _____

Grand Total $ 0.00

Bill ☐ Paid ☐

Applicant's Signature: [Customer's Signature]

Date _____

FOR COMPLETION BY NOTARY PUBLIC ONLY

On this _____ day of _____ , in the year _____ ,

before me _____ personally appeared

_____ , personally known to me (or provided to

subscribed to this instrument, and acknowledged that he (she) executed it.

☐ PHOTO ID VERIFIED

Witness my hand and official seal.

Notary's Signature: _____

My Commission Expires: _____

P.O. BOX 1510
1704 US 59 Bypass North
LIVINGSTON, TEXAS 77351-1510
936-327-5224 - FAX: 936-967-1216

P. 0. BOX 150
3675 US Highway 79 South
HENDERSON, TEXAS 75653-0150
903-854-1000 FAX: 903-854-1278

P. 0. BOX 1691
705 Spur 156
WASKOM, TEXAS 75692-1691
903-687-3600 - FAX: 903-687-1051

PERSONAL INFORMATION

Information About Yourself

Name _____ Employer Name _____

Social Security #. _____ Date of Birth _____ Employer Address _____

Drivers License #. _____ State _____ Employer Town _____

DL Address _____ Employer Tel. No. _____
(City-State-Zip)

Previous Address _____
(Street) (City-State-Zip)

Information About Individual You will Be Sharing This Service With

Name _____ Relationship _____ Employer Name _____

Social Security #. _____ Date of Birth _____ Employer Address _____

Drivers License #. _____ State _____ Employer Town _____

DL Address _____ Employer Tel. No. _____
(City-State-Zip)

Previous Address _____
(Street) (City-State-Zip)

Will you allow Eastex Telephone Cooperative, Inc. to responsibly use your account information (CPNI) to determine if we have products, features, or services that may benefit you in the future? YES ☐ NO ☐

Provide a username for your account: _____

Provide a password for your account: _____

Please answer the following 5 "SECRET" questions:

1) In what city was your mother born? _____

2) What is your favorite color? _____

3) Name your favorite sports team: _____

4) What is your mother's maiden name? _____

5) What is your favorite car, truck, or motorcycle? _____

Email Address (If Available) _____

Customer chooses to use the same information currently on telephone line: _____

PHOTO ID