



For office use only Deposit Date Initials LEC
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**Business Service Agreement** (Complete one for each location)

- Existing Service Working Telephone Number
  New Service (do not have working service) Call Back Number

**Billing/Location Information**      Is Physical Address different from Billing Address  No  Yes

Billing Name  Billing Address  City                      State ____ Zip _____  Contact ( Main/Billing)  Phone #                      Fax		Physical Location Name  Physical Street Address  City                      State                      Zip  Contact (On Site/for Access)  Phone #                      Fax
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**Company Information**

Federal Id #/SSN                      Tax Exempt  No  Yes (Specify)  Local  State  Fed (Must attach exemption Certificate)

Direct Payment Option:  No  Yes (attach ACH Form)

**Type of service requested \*\*Not all packages are available in all service areas\*\***

- LOCAL SERVICE ONLY (select any features/voice mail (where available) you may want with your service)
- LOCAL AND FEATURE PACKAGE (Choose the plan available in your area)
- Five Features Package
  - Basic Caller ID Package
  - Caller ID Premium Package
  - Caller ID Ultimate Package
- LOCAL WITH FEATURES AND VOICE MAIL (Available in select areas)
- LOCAL AND LONG DISTANCE PACKAGE (Choose the plan available in your area)
- 120 Minutes Package
  - 240 Minutes Package
  - 480 Minutes Package
- NT&T LONG DISTANCE (specify plan) \_\_\_\_\_

**CHECK UP TO FIVE OF THE FEATURES:**

- Call Waiting     Caller ID             Conference Calling     Last Call Return     Call forwarding     Hunting
- Call Forward Busy, # forwarding to - \_\_\_\_\_     Call Forward no Answer, # forwarding to - \_\_\_\_\_
- Continuous Redial     Anonymous Call Rejection     Speed Calling     Call Transfer             Call Waiting ID
- Voice Mail (There will be a monthly charge. Not included in the packages and not available in all areas)

**Special Information**

Internet?  Yes  No Provider                      Wire Maintenance Agreement?  Yes  No

**PLEASE LIST EXISTING NUMBERS:**

Telephone Number(s) MAIN BILLING NUMBER \_\_\_\_\_

LETTER OF AGENCY

To Whom It May Concern:

This letter authorizes Nebraska Technology and Telecommunications, Inc. (NT&T) to request and receive data and billing information and to act as our representative for telecommunications. NT&T is authorized to notify our local and/or long distance telephone company of our telecommunications choices for the telephone number(s) listed on this form.

This authorizes NT&T to acquire our telephone number(s) for the purposes of joining our telephone number(s) with their services.

This further authorizes NT&T to switch our long distance service, including IntraLATA long distance in available areas, to NT&T for the telephone number(s) listed below. We understand this authorization changes our long distance carrier. (If applicable)

We understand that IntraLATA long distance service is long distance service, which originates and terminates within the same Local Access Transport Area (LATA). We also understand that it will not be possible to keep NT&T as our IntraLATA long distance Provider should we decide to change our IntraLATA long distance provider.

We understand that we may choose only one long distance carrier for each telephone number listed below. We also understand that our local telephone company may apply a charge for this change.

We agree to pay all charges prior to NT&T acceptance of our telephone service and any additional charges still applicable to the telephone number(s) listed below.

Customer Signature

Date

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