# **ANCHORAGE OFFICE**

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# **UTQIAGVIK OFFICE**

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Fax: 907-852-0006

# www.astac.net • business@astac.net

# **BUSINESS TELEPHONE APPLICATION**

					_	Circle			
Business Name:				s	ole Propr	ietor	Corporation		
Federal Tax ID #									
		completed Exemption Cern-profits/exempt-organizat						Pho	Date
Primary Contact Name		-		·				Phone # Assigned	Date Received
				Contact Phone #				Assig	eivec
Contact Email Address								ned	
Billing Address					_/	/_			
(PO Box only for North Slope)			(City)		(State)	(Zip	Code)		
Location of Service				/					l D
(House or Bldg. # and Room#) (City)									ate C
CPNI VERIFICATION PASS	WORDS								omp
You will be required to use th		word(s) for any account a	ccess or	related services with AS	STAC via p	hone, in-	person or on the web.		Date Completed
					/				
Please provide a Security Question and Answer (use an example or make your own)  Passphrase  Any combination of letters are						ation of letters and for			
Examples: What is the name of your favorite pet?  What is the name of your favorite movie?  Any combination of letters and, numbers						ition of letters unu/or	Custo		
What is your favorite color?								ome	l De
What is your first best fr	riend's na	ıme?						r Acc	posi
Authorized Parties to cor	ntact AST	AC on behalf of this busing	ness					Customer Account	Deposit Required
I. Name				Contact Number				#	quire
II. Name Contact Number									ا
III. Name	II. Name Contact Number								
TELEPHONE DIRECTORY L	ISTING								
Write your name as you wou		to appear in the directory,	and sele	ect the directory option	below				
									\ 
(Business Directory Listing)							(8	SO#	
☐ LISTED(In the phone directory , listed with the operator)No Charge							CSR Initials		
NONLISTED (Not in the pl		• •	•	•				itials	
□ <b>NONPUBLISHED</b> (Not in t	he phone	e directory, not listed with	the ope	rator) <b>\$2.10 per month</b>	1				
LONG DISTANCE Please sel		•							
		ng Distance Calling \$.07 pe		_	ates apply	.**		'	
OTHER:				adhorse area)					<u>'</u>
*Customer will need to conta **Nationwide calling rate do									
_		r., to be territories and m		30					
CUSTOM CALLING FEATU									
Check all features you would		_		_		., n	There May 0 !!!		ća.
☐ Anonymous Call Rejection	\$4.10	☐ Call Waiting	\$3.10	☐ Speed Calling – 8 co		_	Three Way Calling		\$2.0
Calling Number ID	\$7.20	☐ Continuous Redial	\$4.10	☐ Speed Calling – 30 c		_	VIP Alert/Customized Ri	nging	\$3.
Call Forward, Remote	\$6.00	Last Call Return	\$4.10	☐ Toll Restriction (Tota	al) \$4.	05	Wake Up, per request		\$2.0
Call Forward, Variable	\$2.60	☐ Smart Ring (Teen line)	\$2.05	☐ Toll Restriction (Block 1+, Allow 0+)	\$4.	05 Gfir	900# Block, install st time free)		\$0.0

#### **BUSINESS TELEPHONE APPLICATION**

#### SERVICE AGREEMENT

The applicants certify that they are the owners/lessees/tenants of the premises where service is applied for with the lawful authority to sign this application for telephone service and agree to pay the applicable rates and abide by all conditions as prescribed by the Arctic Slope Telephone Association Cooperative, Inc. Tariff for all present and future telephone service. Acceptance of this application by Arctic Slope Telephone Association Cooperative, Inc. constitutes a contract between Arctic Slope Telephone Association Cooperative, Inc. and the applicants. All costs incurred by Arctic Slope Telephone Association Cooperative, Inc. for the collection of any unpaid accounts shall be paid by the applicants. All terms and conditions of the agreement with the original subscriber are incorporated herein by this reference.

We hereby declare that the information provided is true, accurate, and complete to the best of our knowledge and belief, and is voluntarily submitted for the use of receiving telephone service. It is understood that upon presentation, this application becomes the property of Arctic Slope Telephone Association Cooperative, Inc. We also certify that we are each eighteen (18) years of age or older.

The information furnished on this application will be used to determine if a deposit will be required for telephone service. Your signatures in the designated locations authorize Arctic Slope Telephone Association Cooperative, Inc. to conduct credit checks in order to determine possible deposit requirements. A photocopy of these signatures will be considered authorized signatures.

#### STATEMENT OF NONDISCRIMINATION

Arctic Slope Telephone Association Cooperative, Inc. is the recipient of Federal financial assistance from the Rural Utilities Service (RUS), an agency of the U.S. Department of Agriculture, and is subject to the provisions of Title VI of the Civil Rights Act of 1964, as amended, Section 504 of the Rehabilitation Act of 1973, as amended, the Age Discrimination Act of 1975, as amended, and the rules and regulations of the U.S. Department of Agriculture which provide that no person in the United States on the basis of race, color, national origin, age, or handicap shall be excluded from participation in, admission to, denied the benefits of, or otherwise be subjected to discrimination under any of this organization's programs or activities.

The person responsible for the coordinating of the organization's nondiscrimination compliance efforts is the General Manager. Any individual, or specific class of individuals, who feels that this organization has subjected themto discrimination may obtain further information about the statutes and regulations listed above from and/or file a written complaint with this organization; or the Secretary, U.S. Department of Agriculture, Washington, D.C. 20250; or the Administrator, Rural Utilities Service, Washington, D.C. 20250. Complaints must be filed within 180 days after the alleged discrimination. Confidentiality will be maintained to the extent possible.

By signing this agreement, customers authorize ASTAC to perform credit checks to obtain information. Customers further acknowledge having read and understood the terms on the reverse side and agrees to be bound hereby.

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Owner/Authorized Signer (Please print)	Date	Owner/Authorized Signer (Signature)