

## Highland Telephone Cooperative, Inc. 26 Crit King Rd

PO Box 870 Whitley City, KY 42653 (606) 376-5311

## **Residential Application for Membership and Telephone Service**

Applicant Name:		Date of Birth:
Spouse/Co-Applicant Name:		Date of Birth:
911 Address:		
Mailing Address:		
Primary Social Security:	Seconda	ry Social Security:
Primary E-Mail Address:		
Contact Number Where You May B	e Reached:	
Have you had service with us befo	re? Yes No	
If yes, what was the number?		
Has present location ever had service with us before? Yes No		
Please select which type of bill you wish to receive. Summary (1 pg.) Detailed (Multiple pgs.)		
Credit: Your credit may be checked with the credit bureau. If credit is unacceptable, you may be required to pay an advanced deposit and installation fee. You may be notified by letter of this amount. The deposit may vary between \$50 to \$100 depending on previous bills with us. The installation fee may be \$50 and will be applied to your first month's bill. The deposit will be held for 12 months and will be refunded on your billing statement.		
TN Customers Only: Do you reside in the City Limits? Yes No		
KY Customers Only: What fire of	district do you live in?	
3-1 North McCreary	3-2 Central McCreary	3-3 South McCreary
3-4 Eagle Sawyer	3-5 West McCreary _	3-6 McCreary County East
All applicants please enclose charges on your first billing	<b>-</b>	ou will be billed for any installation aid installation fee.
organized under the laws of the State of Cooperative a right of easement to conduct service. The applicant, by becoming a me expressly understood his private property the event of default in the payment of any a	Tennessee, under the name of High ct, operate, and maintain a telephon ember, assumes no personal respoi is exempt from the execution for an mount due, and if the account is pla	ship and agrees to take telephone service from a corporation land Telephone Cooperative, Inc. The applicant will grant the line on the property where the Applicant receives telephone is ibility for any debts or liabilities of the Cooperative, and is y such debts or liabilities. The Applicant hereby agrees that in ced in the hands of an agency or attorney for collection of legal ency and attorney fees and court costs incurred and permitted
Date:A	oplicant's Signature:	