

## **New Customer Application**

(Digital TV, High Speed Internet, and Nationwide Cellular forms are separate)

Please complete necessary fields and return to Albany Fiber Communications by mail at 131 6<sup>th</sup> Street Albany, MN 56307 or by fax to 320.845.7000. If you have any questions, please do not hesitate to call 320.845.2101 or visit www.albanytel.com

Date:	
Customer Information	
Name:	
911 Address:	Township:
Billing Address (if different)	County
Email Address:	
Type of Dwelling: Business Residence Mobile Hor	me: Yes No
If this is a new structure, please provide directions to the location: _	
Name of party who last lived at this location:	
Nearest neighbor who has our service:	
Credit Information	
Date of Birth: Social Security #:	Single/Married:
Place of Employment:	
Spouses Name (if applicable): Spouses So	ocial Security #:
Spouse's Place of Employment:	
Name of Residents over 18 at this location	
Nearest Relative and telephone number	
Are you renting this property? Yes No	
Previous/current telephone service provider:Yo	ur Telephone Number
Date Disconnected:	
Have you been our customer before? Yes No	
If yes, Date: Previous Telephone number	er:
May we contact you at your place of employment? Yes No_	
If yes, telephone number:	

## To begin Service

- \* Provide us with a copy of your valid driver's license.
- \* Please fill out the additional Service Application form. (www.albanytel.com)
- \* A Deposit may be required depending upon creditworthiness. (You will be notified if this is required.)
- \* Installation charges will be added on to your first months' bill. (Phone: \$50.00, TV or Internet: \$100.00,
- 2-3 services: \$150.00, Managed WiFi: \$50.00 Free if done with initial install.) Exceptions may apply.
- \* If Plowing is required, charges are \$100 for the first 300 feet and \$.34/foot over 300 feet.
- \* Telephone bills are due on the 25<sup>th</sup> of each month, services are subject to disconnect if payment is not made by the 25<sup>th</sup> of each month.
- \* I acknowledge that the above information is accurate to the best of my knowledge. Additionally, I understand if found otherwise, service may be disconnected immediately.

ignature of person responsible for paying the	bill
Contact Phone Number	_

Please Return to: Albany Fiber Communications 131 6th Street Albany, MN 56307

Office Use Only	
NUMBER ASSIGNED	DATE SERVICE WILL BEGIN

Scheduled Install Date: