



2222 NW Highway 64 • PO Box 1188 • Guymon, Oklahoma 73942 • (580) 338-2556

Internet Application - Fiber

For Office Use Only	
<input type="checkbox"/>	FTTP
<input type="checkbox"/>	Network

Billing Name (s)		Billing Address	
Account #		Activation Date	
Service Order #		Agreement #	
Rep Name & #		Promo	
Home Phone #		Cell Phone #	

High-Speed Internet

Broadband Plans	Residential	Business
100 Mbps download 100 Mbps upload	\$59.99	100 Mbps download 50 Mbps upload \$67.99
250 Mbps download 250 Mbps upload	\$85.99	250 Mbps download 125 Mbps upload \$93.99
1 Gbps download 1 Gbps upload	\$115.99	1 Gbps download 500 Mbps upload \$159.99
Not Available in All Areas		*Some Restrictions Apply

Operating System—only the supported versions of Apple and Windows.

Computer is a Laptop: Yes No Networked with other computers: Yes No

High-Speed Internet installation charge \$135.00 (10/100 Ethernet card is required).

Standard 10/100 Ethernet Card \$25.00, Small 10/100 Ethernet Card \$40.00, USB/Ethernet Adapter \$35.00

Modem will be furnished while you have service but must be returned if service is disconnected or charges will apply.

Business Domain Name: _____

Customer-owned computer equipment for PTCI to set up @ hourly rate to be quoted (i.e., PC, Mac, Data Backup, Printer, etc.).

_____ NONE _____ (initials)

Note: PTCI will complete the connection to the internet but it will be the customer's responsibility to set up their account with game console provider.

For information on PTCI's Open Network Policy and Customer Information go to <http://www.ptci.net/terms-compliance-regulation>.

Billing Name (s) _____ Account # _____

Whole Home WiFi and Streaming Care

Whole Home WiFi Plus WiFi Plus Tech Home Support	\$19.95 per mo	
Whole Home WiFi unit	\$9.95 per mo	
Whole Home WiFi unit plus one WiFi extender	\$12.95 per mo	
Whole Home WiFi unit plus two WiFi extenders	\$17.95 per mo	
Whole Home WiFi unit plus three WiFi extenders	\$22.95 per mo	
Whole Home WiFi Installation	\$45.00	
Streaming Care	\$3.50 per mo 12-month minimum	(initials)

TechShield

TechShield plus WiFi	\$19.95 per mo	
TechShield Total Tech Premium	\$15.99 per mo	
TechShield Professional	\$14.99 per mo	
TechShield	\$6.99 per mo	
Total Tech Premium	\$9.00 per mo	
File Hopper 250GB	\$14.95 per mo	
One time set-up fee	\$4.95	
Secure remote install	\$24.95	

PTCI reserves the option to install wireless or wired networking.

Note: PTCI will complete the connection to the internet but customer must set up their account with game console provider. (If your computer is password protected please fill out the following username & password information.)

_____ Username _____ Password for device #1 (Administrator)

_____ Username _____ Password for device #2 (Administrator)

Note: Each computer must have 802.11G network card or PTCI will install one.

Billing Name (s) _____ Account # _____

Whole Home WiFi Early Termination Charge

Elapsed Time _____ Amount Due _____
If disc any time less than twelve (12) months \$200.00

Applicant Signature _____ Date _____

If installed under a promotion, customer will be required to sign a one year commitment

High Speed Internet FTTP, Whole Home WiFi Secure Network for Home Installation Agreement

Customer requests installation of High Speed Internet, FTTP or Whole Home WiFi Secure Network for Home equipment such as modem(s), Receiver(s), broadband router, extender (s), network card(s) or any other equipment used to install the service(s) by PTCI. Customer hereby waives any warranty or claim for damages against PTCI as a result of this installation except for damages caused by willful negligence. PTCI shall not be liable for any damages resulting from acts of God or other intervening causes and in no event shall PTCI be liable to Customer for any consequential damages which may be incurred. PTCI assumes no responsibility or liability for access to User’s home network by unauthorized person.

Applicant Signature _____ Date _____

High Speed Internet Early Termination Charge

Elapsed Time: _____ Amount Due _____
If disc any time less than twelve (12) months \$200.00

Applicant Signature _____ Date _____

EQUIPMENT RETURN

Customer Agrees to protect and insure all leased High Speed Internet FTTP, Whole Home WiFi Secure Network or any other equipment used to install the service(s) against lightning, theft, collision, water damages and other losses in the amount of the full price (listed below) of the equipment. ** In the event of any malfunction of the equipment the customer shall report it to PTCI trouble department. Customer agrees not to repair or have others attempt to repair the equipment. Customer will be liable for repairs if the manufacturer seal is broken or for any other willful damage, if the equipment is not returned in proper working condition, the customer will be billed for the repair charges up to, but not to exceed, the full price of the equipment.

Indoor ONT(s) Gigacenter(s)	\$109.00 to \$490.00/Ea	Mesh Unit WiFi Extender(s)	\$65.00 to \$90.00/Ea
MBR with Sim Card	\$390.00/Ea	WiFi Router(s)	\$75.00 to \$200.00/Ea
Battery Backup Power Supply	\$70.00 to \$135.00/Ea		

Applicant Signature _____ Date _____

***PRICES ARE SUBJECT TO CHANGE AT ANY TIME**



PTCI

Application For Membership In Panhandle Telephone Cooperative, Inc. for Telephone and/or other Communication Services

Telephone Internet

Applicant: _____

Date: _____

Joint Application: Yes or No

PANHANDLE TELEPHONE COOPERATIVE, INC.

2222 NW Hwy 64
PO Box 1188
Guymon, Oklahoma 73942
(580) 338-2556

Co-Applicant: _____

Address: _____

APPLICANT INFORMATION

The undersigned (hereinafter called the "applicant") hereby applies for membership in Panhandle Telephone Cooperative, Inc., a corporation organized under the laws of the State of Oklahoma, for the purpose of furnishing telephone and/or other communications services, upon the following terms and conditions:

1. The Applicant will pay in advance all charges occurring for the first month for exchange service, equipment, and the service connection charge.
2. The Applicant will, when telephone and/or other communications services becomes available, take from the Cooperative telephone and/or other communications services to be used on the premises described above and will pay thereof monthly at rates to be determined from time to time in accordance with the bylaws of the Cooperative, it being expressly understood that all amounts paid by Applicant in excess of operating costs and expense of the Cooperative are furnished by him as capital and he shall be credited with the capital so furnished as provided in the bylaws.
3. The Applicant, if also the property owner, will grant to the Cooperative a right-of-way easement to construct, operate and maintain a telephone line and/or other communications systems on the land, and in or upon all streets, roads or highways abutting said land, where this service is provided.
4. The Applicant will comply with and be bound by the 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 for responsibility or 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.

This application is made in consideration of similar applications by others and is understood to be an agreement with such applicants. **JOINT MEMBERSHIP:** In order for a husband and wife to hold a joint membership, both must sign this application. If both sign, the term "member" shall be deemed to include a husband and wife holding joint membership and any provision relating to the rights and liabilities of membership shall apply equally, with respect to the holders of a joint membership. The vote of either separately or both jointly shall constitute a joint vote.

IF RESIDENCE:

SIGNATURE OF APPLICANT: _____

PRINT NAME: _____

SIGNATURE OF CO-APPLICANT: _____

PRINT NAME: _____

IF BUSINESS:

NAME OF BUSINESS: _____

TYPE OF ENTITY: _____
(corporation, partnership, single ownership, organization, other)

SIGNATURE OF OFFICER OR AUTHORIZED AGENT _____

TITLE _____

SPECIFIC INSTRUCTIONS:

NAME: If you are an individual, you must generally provide the name shown on your social security card. However, if you have changed your last name, for instance, due to marriage, without informing the Social Security Administration of the name change, please enter your first name, the last name shown on your social security card, and your new last name.

OFFICE INFORMATION:

Membership # _____

Name _____

Account # _____

SIGNATURE OF INDIVIDUAL RESPONSIBLE

FOR ACCOUNT _____