

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

Application For Telephone Service

Date: Exchange:		
Applicant:	Co-Applicant:	
Location of building where phone is to be	e installed.	
Rural Section:	Township Range:	
How installer can locate your home: Nei	ghbor, Street, House Description	
COMPLETE AND RETURN WITH YO Monthly charges + tax are billed in adva	OUR REMITTANCE IN THE AMOUNT	AS FOLLOWS:
1-Month's Line Access	\$	
Subscriber Line Charge	\$	
Average Service Connect Charge	\$	
Other Services:		
	\$	
	\$	
	\$	
*Deposit (To Guarantee Charges)	\$	
TO	TAL \$	
*Upon investigation, if we find your telephone	ne credit not satisfactory a deposit will be requ	uested before phone service will be provided.
Applicant Information LIST MY NAME IN DIRECTORY AS:		
	FIRST NAME	MIDDLE
BILLING ADDRESS: Street, Rt. or Box		
City, State, Zip Code		
STATE	MENT AND TELEPHONE DIRECTORIES WILL	BE MAILED TO ABOVE ADDRESS
RESIDENCE - If you are not the landowner, gi	ve his name and address	
BUSINESS - Under what classification is it to a	ppear in yellow pages	
s this building wired for a telephone	_ Has there been service at this location	Is this a mobile home
How can you be reached to install your telepho	nne service	

Prohibited Use of Service:

To help reduce the number of illegal robocalls that may originate on our network, PTCI has implemented robocall mitigation efforts to monitor our network and verify that calls originating over our network are from legitimate numbers belonging to a valid PTCI customer. In line with FCC rules, users of PTCI's voice service are prohibited from originating illegal and spoofed robocalls with the intent to defraud, cause harm or wrongly obtain anything of value from the recipient of the call.

Termination of Voice Service:

Violation of the Prohibited Use of Service terms can result in suspension or termination of the user's voice telephone service.

For more information on PTCI's robocall mitigation efforts, contact Brian Hough at 580-338-2556.

For information on PTCI's Open Network Policy and Customer Information click HERE.

I have been offered account freeze protection, at no cost, to protect my account from fraudulent port-out requests.

Customer Initials ______

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,	
Signature of Officer or Authorized Agent:	Print Name:
Title:	
Signature of Individual Responsible for Account:	
OFFICE INFORMATION:	
Name #	
Account #	