



Service Application

Stratford

1001 Tennyson Ave • Stratford, IA 50249
515-838-2390 • Toll Free: 800-426-1646
www.stratfordtelephone.com

PERSONAL INFORMATION

Applicant

Name _____ Business Name _____
Phone _____ Social Security # or Tax ID _____
Email _____ Date of Birth _____

Service Address _____ City _____
Billing Address _____ State _____ Zip _____

Employer _____ Length of Employment _____
Address _____ Bank Name _____

Account Security *(Used to verify your identity when you call in)*

Security Question: *In what year were you born?*

Answer _____ Password (4-digits) _____

Forgot Password Question: *What is the last name of your favorite teacher?*

Answer _____

Co-Applicant

Name _____ Social Security # _____
Phone _____ Date of Birth _____
Email _____

Employer _____ Length of Employment _____
Address _____ Reference _____

SERVICE INFORMATION

Start Date for Service _____ Additional Information / Special Instructions _____
Previous Service with us before? Yes No _____
If so, when? _____
Account # _____
Entered by SMTC

PHONE SERVICE OPTIONS

Phone Service

Please check box if you would like request phone service

Directory Listing

Listed Unlisted

If listed, how would you like it to read?

All telephone numbers are automatically listed with directory services and published in our print directory. There is a monthly charge of \$.75 per number to be unlisted and a monthly charge of \$.25 for each additional listing.

Long Distance Company of Choice

See list of available carriers; if you change carriers at a later date, there is a \$5.00 charge per lata changed.

For Interlata calls _____
Outside of 515 area code

For Intralata calls _____
Inside of 515 area code

Lifeline Assistance

Lifeline is a federal program that lowers the monthly cost of phone and internet. Eligible customers will get a monthly credit on their bill. You can only use Lifeline for either phone or internet, but not both. To find out if you are eligible or for more information, call our office or visit www.lifelinesupport.org.

By signing this application, you are acknowledging that you have been made aware of the Lifeline program.

Caller ID

Stratford Mutual Telephone is able to transmit both name and number from the caller if the caller is sending caller ID information. The cost for this service is \$2.00 per month.

Add Caller ID to my service Not needed

Options Available at No Charge

Select any options you would like added to your service.
Services are added only upon request of customer.

900 Number Blocking Call Forwarding

Call Waiting 3-Way Calling

Short Speed Call (holds 8 #s in memory)

Long Speed Call (holds 30 #s in memory)

ADDITIONAL SERVICES

Complete TV Video Services

Select each service requested.
Prices listed on seperate enclosed sheet.

Basic

Expanded Basic

DVR

Whole-home DVR

HD Equipment

Premium Movie Packages:

Cinemax

Encore/Starz

HBO

Showtime

Number of set top boxes required (*up to 8 available*): _____

Broadband Internet Services

Select the level that best suits your needs.

Level 1

Level 2

Level 3

Static IP

How many? _____

Complete WiFi

Managed WiFi solution for your entire home

BILLING PROCESS

All services are billed on one bill coming from Stratford Mutual Telephone Company on the 15th of each month. Bills are due by 11:00 AM on the 5th of the following month. If bills are not paid by 11:00 AM on the due date, a final notice is sent notifying the customer that their service is subject to disconnection if not paid by 11:00 AM five days after the due date. Should any of these dates fall on a holiday or weekend, then they become due on the next business day.* We accept MasterCard or Visa credit or debit cards and we do have an automated bill paying service.

**Customers can pay online at www.stratfordtelephone.com as well as in our office at 1001 Tennyson Avenue or by mail to PO Box 438, Stratford, IA 50249.*

CUSTOMER ACKNOWLEDGEMENT

In making this application, the undersigned agrees to the rules and regulations of Stratford Mutual Telephone Company as set forth in the exchange tariff, and to any changes in rules, or rates for the service furnished under this application. This application becomes a contract when accepted by the Stratford Mutual Telephone Company.

Applicant's Signature _____ Phone # _____

Co-Applicant Signature _____ Date _____

Accepted by SMTC Representative _____