



RESIDENTIAL APPLICATION FOR TELEPHONE SERVICE

All questions must be answered as accurately as possible. **PLEASE PRINT FORM AND VISIT THE R CONFIDENTIAL BTC MAIN OFFICE** at 30 Victoria Street, Hamilton to have your request processed in a timely manner. Please remember to include your signature where necessary.

CUSTOMER DETAILS

Select one - New Customer Existing /Previous Customer - Provide an existing/previous telephone : _____

Name: Mr. Mrs. Ms. _____ DOB: _____
(Surname, First, Middle)

House #: _____ House Name: _____ Assessment #: _____

Address: _____ Postal Code: _____
(Street, Parish)

Contact #: _____ Email: _____

Mailing Address: _____ Postal Code: _____
If Different From Above (Street, Parish)

Present Landlord's Name: _____ Phone #: _____

Occupation: _____ Employer: _____

Employer's Address: _____ Postal Code: _____

Employer's Phone #: _____ How long have you been employed with your current employer? _____

If you have been employed with your current employer for less then 5 years, please provide the name and address of your previous employer.

Previous Employer: _____ Phone #: _____

Employer's Address: _____ Postal Code: _____

Reference 1: _____ Phone #: _____

Reference 2: _____ Phone #: _____

IDENTIFICATION Type: Drivers License Passport ID #: _____

Are you Bermudian: Yes No If Non-Bermudian, please provide an overseas address to which you will proceed when leaving Bermuda or address of nearest living relative by completing the Non-Bermudian Section below.

NON-BERMUDIANS ONLY

Overseas Address: _____ City: _____ State: _____ Zip: _____
(Street)

Country: _____ Social Security #: _____ Date Due To Leave Bermuda: _____

MARITAL STATUS Married Single Divorced Widowed

Given Names of Spouse: _____
(First, Middle)

Occupation: _____ Employer: _____

Employer's Address: _____ Postal Code: _____

Employer's Phone #: _____ How long have you been employed with your current employer? _____

CREDIT AND PAYMENT DETAILS

Name as it appears on card: _____ Type: Visa M/C AMEX

Credit/Debit Card #: _____ - _____ - _____ Expiry Date: _____

Note: If this account is overdue more than 45 days from date of invoice and provided I have not submitted written notice of dispute, my signature on this agreement authorizes BTC to debit my Credit/Debit Card listed above.

Publish Telephone Number Your new telephone number will be published in the Telephone Directory

Automatic Monthly Payment An instant charged on the 25th of the month following the date of invoice



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MAXIMIZE YOUR EXPERIENCE

Establishing a local phone line is only your first step! Maximize your experience with the additional features BTC offers its customers. However these services are only made available once your application for service has been approved.

CALLING FEATURES - Select any of the following Calling Features to add to your existing BTC Local Phone Line.

Don't Miss Important Calls

- Call Waiting
- Smart Ring
- Call Waiting / Distinctive Call Ringing
- Incoming Call Return

Identify Your Callers

- Caller ID Deluxe

Talk to Multiple Callers

- Three-Way Calling

Don't Miss Messages

- Voice Mail

Forward Your Calls

- Call Forwarding
- Selective Call Forwarding

Protect Your Privacy

- Selective Call Rejection
- Selective Call Acceptance

Wake Up on Time

- Wake-up / Call Reminder

Call Faster and Easier

- Speed Dialing
- Outgoing Call Repeat

DSL AT HOME - Select a Package:

Data Only

- Simply DSL 1.0
- Simply DSL 2.0
- Simply DSL 4.0
- Simply DSL 6.0
- Simply DSL 8.0
- Simply DSL 10.0

Data & Voice

- DSL 4.0
- DSL 6.0
- DSL 8.0
- DSL 10.0

Data, Voice & Calling Features

- DSL 4.0 Premium
- DSL 6.0 Premium
- DSL 8.0 Premium
- DSL 10.0 Premium

Internet Service Provider - Select an ISP:

- Logic Communications
- North Rock Communications
- Transact Limited

DECLARATION

I declare that I am over 21 years of age, and agree to the conditions for the current Bermuda Yellow Pages Telephone Directory, a copy of which I have received and understood. I also agree to accept all debt, collection, legal and other charges incurred in attempting to recover all overdue amounts.

Applicant's Signature: _____ Date: _____

OR If Applicant is Under 21 Years of Age – In consideration of The Bermuda Telephone Company Limited, providing the applicant with Telephone Service I agree to the conditions of the provision of service as set out in the current Bermuda Yellow Pages Telephone Directory and will be responsible for any charges in respect of the Telephone Number allocated to them.

Guarantor Name: Mr. Mrs. Ms. _____ DOB: _____
(Surname, First, Middle)

Address: _____ Postal Code: _____
(Street, Parish)

Contact #: _____ Email: _____

Guarantor Signature: _____ Date: _____

Bermuda Telephone Company Limited must be notified of any changes to the information contained in this form immediately

FOR OFFICIAL USE ONLY

BTC Sales Representative: _____



RESIDENTIAL LONG DISTANCE CARRIER PROVIDER FORM

R CONFIDENTIAL

ALL QUESTIONS MUST BE ANSWERED AS ACCURATELY AS POSSIBLE PLEASE PRINT AND FAX TO 296-2499 OR VISIT THE BTC MAIN OFFICE AT 30 VICTORIA STREET, HAMILTON TO HAVE YOUR REQUEST PROCESSED IN A TIMELY MANNER. PLEASE REMEMBER TO INCLUDE YOUR SIGNATURE WHERE NECESSARY.

CARRIER PROVIDER DETAILS

Please select the carrier of your choice

North Rock Communications

Logic Communications

Cable & Wireless

TeleBermuda International

CUSTOMER DETAILS

Name of Account: _____ Phone #: _____

Address: _____ Postal Code: _____
(Street, Parish)

Applicant's Signature: _____ Date: _____

AUTHORISATION

I understand that I will be responsible for all long distance calls made from my registered telephone number and authorize The Bermuda Telephone Company to make available all relevant information regarding my long distance service to the carrier of my choice. I also accept the provision of service as laid out in the current Bermuda Yellow Pages Telephone Directory, a copy of which I have received and understood. I hereby authorize The Bermuda Telephone Company Limited to apply my Long Distance Service to the above carrier.

I agree to contact my long distance carrier provider, specified above, for any special rates and/or discounts they may provide.

Applicant's Signature: _____ Date: _____

FOR OFFICIAL USE ONLY

BTC Sales Representative: _____ Service Order #: _____

Please be advised, a copy of this application will be submitted on your behalf to the carrier of your choice and another will be filed in your BTC records.