



COOPERATIVE TELEPHONE EXCHANGE

425 PARKER ST., PO BOX 95, STANHOPE, IA 50246

PHONE: 515-826-3206 * FAX: 515-826-3200

ACCT# _____

INS# _____

INTERNET SERVICE APPLICATION

| APPLICANT INFORMATION | | | |
|--|---|--|-------------------------|
| TYPE OF ACCOUNT <input type="checkbox"/> BUSINESS <input type="checkbox"/> RESIDENTIAL | | BASED ON OUR TELEPHONE SERVICE CATALOG CTE DOES REQUIRE A LANDLINE TELEPHONE FOR INTERNET SERVICE. | |
| NAME | | CTE HOME PHONE# | |
| ORGANIZATION | | CELL PHONE# | |
| ADDRESS | | CITY | STATE ZIP |
| BROADBAND SPEEDS | | | |
| PLEASE CHOOSE ONE OF THE FOLLOWING HIGH SPEED INTERNET OPTIONS | | | |
| <input type="checkbox"/> 10M | <i>Can handle multiple devices, Netflix, Skype and online gaming.</i> | \$20.00 PER MONTH | |
| <input type="checkbox"/> 25M | <i>Will handle more streams and have quicker downloading on multiple devices.</i> | \$45.00 PER MONTH | |
| <input type="checkbox"/> 50M | <i>Download large files instantaneous & send large attachments.</i> | \$85.00 PER MONTH | |
| <input type="checkbox"/> 100M | <i>For data intensive business use.</i> | \$125.00 PER MONTH | |
| <input type="checkbox"/> EMAIL ONLY | <i>netINS Email Only (Requires internet connectivity)</i> | \$5.00 PER MONTH | |
| PRIMARY EMAIL ACCOUNT | | | |
| A PRIMARY INS EMAIL IS REQUIRED. MUST START WITH A LETTER AND BE 3-15 CHARACTERS. NUMBERS, PERIODS AND UNDERSCORES ARE ALLOWED. | | | |
| PRIMARY USERNAME <small>(MUST BE ALL LOWERCASE) _____ @netins.net</small> | | MOTHER'S MAIDEN NAME (FOR PASSWORD SECURITY) | |
| FREE ADDITIONAL EMAIL ACCOUNTS | | | |
| ADDITIONAL EMAIL ACCOUNTS ARE OPTIONAL. YOU MAY HAVE UP TO 4 ADDITIONAL EMAIL ACCOUNTS AT NO ADDITIONAL CHARGE. USERNAMES MUST START WITH A LETTER AND BE 3-15 CHARACTERS. NUMBERS, PERIODS AND UNDERSCORES ARE ALLOWED. | | | |
| ADDITIONAL USERNAME 1: | | REAL NAME: | |
| ADDITIONAL USERNAME 2: | | REAL NAME: | |
| ADDITIONAL USERNAME 3: | | REAL NAME: | |
| ADDITIONAL USERNAME 4: | | REAL NAME: | |
| ADDITIONAL EMAIL ACCOUNTS | | | |
| ADDITIONAL EMAIL ACCOUNTS \$5.00 PER MONTH. MUST BE 15 CHARACTERS OR LESS. | | | |
| ADDITIONAL USERNAME 5: | | REAL NAME: | |
| ADDITIONAL USERNAME 6: | | REAL NAME: | |
| COMPUTER OPERATING SYSTEM | | | |
| <input type="checkbox"/> WINDOWS XP <input type="checkbox"/> WINDOWS VISTA <input type="checkbox"/> WINDOWS 7 <input type="checkbox"/> WINDOWS 8 <input type="checkbox"/> WINDOWS 10 <input type="checkbox"/> MACINTOSH | | | |
| SIGNATURE | | | |
| A SIGNATURE IS REQUIRED TO PROCESS YOUR ORDER. YOUR SIGNATURE BELOW INDICATES ACCEPTANCE OF THE BILLING TERMS AND THE COOPERATIVE TELEPHONE EXCHANGE-net-INS "INTERNET-DSL TERMS AND CONDITIONS. | | | |
| APPLICANT SIGNATURE | | DATE | |