



# CLEC Wireless Service Agreement

Name \_\_\_\_\_ SS No. \_\_\_\_\_ DL No. \_\_\_\_\_  
 Spouse (if joint) \_\_\_\_\_ SS No. \_\_\_\_\_ DL No. \_\_\_\_\_  
 Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Installation Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Preferred Method of Contact: Cell No. \_\_\_\_\_ Home No. \_\_\_\_\_  
 E-mail Address \_\_\_\_\_ Other: \_\_\_\_\_

### **INTERNET SERVICE PLANS (Monthly Charges)**

- WISP50 (50 Mbps download/20 Mbps upload) - \$59.95
- WISP20 (20 Mbps download/10 Mbps upload) - \$49.95

**STANDARD INSTALLATION** includes wireless bridge and wiring to customer owned router; 10 feet of cable installed through one (1) outside wall terminating at an electrical outlet on an interior wall.

**NON-STANDARD INSTALLATION** will be billed at \$95.00 per hour plus cost of materials.

### **OPTIONAL INTERNET SERVICES AND EQUIPMENT (Wireless AC Router)**

- Purchase: \$245.00 (Includes 90-day warranty from date of purchase.)
- Lease: \$9.95/mo. (See attached Lease Agreement)

### **TERMS AND CONDITIONS**

\_\_\_\_\_  
 (Initial) I agree to the terms and conditions of HCTC's Network Management and Acceptable Use Policy and Communications Service Agreement (attached).

\_\_\_\_\_  
 (Initial) Minimum commitment of 12 months required. Standard installation of \$99.00 is due at time of application. Applicable taxes, fees and surcharges will apply.

\_\_\_\_\_  
 (Initial) **COMMITMENT TERM:** Customer agrees that a \$99.00 termination fee will be charged to the account if this agreement is terminated before the 12-month commitment. Failure to return wireless equipment within 30 days of termination may result in an additional charge of \$275.00.

\_\_\_\_\_  
 (Initial) **SAVE \$10 ON YOUR FIRST BILL.** Enroll in Auto Pay & Paperless Billing (see attached ACH Debit Form)

#### **SmartHub Login (online bill pay)**

E-mail: \_\_\_\_\_

Password: \_\_\_\_\_ (Minimum of 10 letters and numbers)

\_\_\_\_\_  
 Signature of Applicant Date

\_\_\_\_\_  
 Signature of Spouse (if joint) Date

<b>OFFICE USE ONLY</b>			
Service Charges	\$ _____	Internet No.	_____
Sales Tax	\$ _____	Service Order No.(s)	_____
Total Paid	\$ _____		_____
		Date Rec'd.	_____ By _____