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[prtc@progressivetel.com](mailto:prtc@progressivetel.com)

Doc Vault	<input type="checkbox"/> Application <input type="checkbox"/> License <input type="checkbox"/> Lifeline	Memb #	
		SO #	
NLL?		Cust #	
Zmb	Only if using PRTC em	Acct #	

Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_

A P P L I C A N T	Name (Last) _____ (First) _____ (MI) _____	
	If published, list in the phone book as: _____	
	Mailing Address _____	City/State/Zip _____
	911 Address _____	County _____
	Email Address _____	Cell # _____
S P O U S E	Social Security Number (PRTC will take verbally) _____ / _____ / _____	Birthdate ____/____/____
	Employer _____	Employer Phone # _____
	Spouse's Name _____	Spouse's Cell # _____
	Spouse's Email Address _____	
	Spouse's SS # (PRTC will take verbally) _____ / _____ / _____	Birthdate ____/____/____
	Spouse's Employer _____	Employer Phone # _____
	Estimate Monthly Long Distance: \$15____, \$30____, \$50____, \$100, Other \$____	
	Location is: _____ House _____ What color is it? _____ _____ Doublewide _____ Is location on a: _____ Slab _____ Crawl Space _____ Singlewide _____ If we have to plow a drop, do you want to be called prior? _____ _____ Other: _____	
	Paper Bill / E-bill / Both? _____ Do you want a PRTC email addr? _____ Joint Account? Yes OR No	
	Use which email address for e-bill? _____ Applicant OR _____ Spouse	
	If we need to contact you about your account, what number should we use? _____	
	Do you receive any of the following (must be in the applicant's name, or spouse's name if membership is joint) _____ Social Sec disability _____ Medicaid Do you or does anyone in your household have a government _____ Food Stamps _____ AFDC issued cell phone? ( ) Yes ( ) No	
	<b>Current documents required for proof.</b>	
	Other Information _____	
If someone other than applicant will be responsible for this bill, sign here. If the bill isn't paid, it will be transferred to your line. Phone Number: _____ Signature: _____		
<small>*I understand: 1) I am responsible for returning all equipment installed by PRTC to avoid being charged; 2) If service is suspended for non-pay, a reconnect fee is required to restore (amount of the reconnect fee is based on what services are being restored). Your signature on this application indicates your approval; 3) I am responsible for any fees involved in collections (postage, court fees, etc.); 4) I approve that any of the above information can be used in the collection process, which includes verifying with banking institutions of active service for garnishment purposes; 5) Social Security number and Date of Birth will be used to run a soft credit check--this will not affect my credit score.</small>		
<small>*If applying for Broadband Internet service, I am aware that I can see the different packages (Broadband Consumer Labels) by either: 1) visiting <a href="http://www.progressivetel.com">www.progressivetel.com</a>, 2) having a CSR email the packages to me, 3) request that paper copies be supplied to me either in person or via mail, or 4) have them read aloud word-for-word in their entirety.</small>		

Agreement # \_\_\_\_\_

Signature: \_\_\_\_\_

LANDLINE	<input type="checkbox"/> Wire Maintenance (Install ___ AP's)		<input type="checkbox"/> Anonymous Call Rejection		<b>Features</b>	
	<input type="checkbox"/> Hot to Side		<input type="checkbox"/> Call Forwarding		<input type="checkbox"/> Last Caller ID Erasure	
	<input type="checkbox"/> Lease Phone ( ___ Wall; ___ Desk)		<input type="checkbox"/> Call Forwarding-Busy		<input type="checkbox"/> Repeat Dialing	
	<input type="checkbox"/> Non-Pub; ___ Private		<input type="checkbox"/> Call Return		<input type="checkbox"/> Selective Call Rejection	
	<input type="checkbox"/> TBE: Collect / 3rd # / Both		<input type="checkbox"/> Call Reminder		<input type="checkbox"/> Speed Dialing	
	<input type="checkbox"/> Class Services Discount		<input type="checkbox"/> Call Waiting		<input type="checkbox"/> Teen Service	
	<input type="checkbox"/> Lifeline Credit <b>(USC EXEMPT!!!)</b>		<input type="checkbox"/> Caller ID		<input type="checkbox"/> Three-Way Calling	
	<input type="checkbox"/> Carrier _____		<input type="checkbox"/> Caller ID w/Call Waiting		<input type="checkbox"/> Toll Block	
	<input type="checkbox"/> International? _____		<input type="checkbox"/> Distinctive Ringing		<input type="checkbox"/> Toll Control w/pin _____	
	<input type="checkbox"/> PIC Freeze? _____		<input type="checkbox"/> Home Intercom		<input type="checkbox"/> Voice Mail	
VOICE	<b>Voice over IP</b>					
	<input type="checkbox"/> Customer will use one of PCCS's numbers: _____					
	<input type="checkbox"/> Customer will port over existing phone number(s): _____ (PCCS will need the last billing statement from the existing number(s))					
	<input type="checkbox"/> Non-Pub <input type="checkbox"/> Publish, list as: _____					
	<input type="checkbox"/> Customer will: ___ use Voice Mail (included @ N/C), ___ use their own answering machine, OR ___ neither					
TV	<input type="checkbox"/> If Voice Mail is added : <input type="checkbox"/> customer sets up their own greeting					
	<input type="checkbox"/> <input type="checkbox"/> PRTC sets up an automated greeting for the customer with the wording of their choice					
	<input type="checkbox"/> Set Top Box(es)					<input type="checkbox"/> ISP
	<input type="checkbox"/> DVR Remote Storage					
	<input type="checkbox"/> Run Coax to additional TV's					
<input type="checkbox"/> Package(s): _____						
BROADBAND	<input type="checkbox"/> On-Screen Caller ID					<input type="checkbox"/> No TV Promo
	<input type="checkbox"/> 2-story with TV upstairs					<input type="checkbox"/> No BB Promo
	<b>Speed</b>	<b>Wi-Fi Router</b>	Username (length 6+, no CAPS, characters can be dash, period, underscore)			
	<input type="checkbox"/> Silver-250mg	<input type="checkbox"/> Lease Progressive's	Password (length, 8-16; at least 1 letter and 1 number)			
	<input type="checkbox"/> Gold-500 mg	<input type="checkbox"/> Supply your own				
ADDITIONAL	<input type="checkbox"/> Platinum-1G	<b>Surge Protector</b>	E-bill Email Address (Smarthub):			
		<input type="checkbox"/> Lease Progressive's	Wifi Security Key (if leasing PRTC router) (8-16 characters)			
		<input type="checkbox"/> Buy Progressive's				
	<b>No Landline</b>	<input type="checkbox"/> Supply your own				
	<input type="checkbox"/> Maintenance	<b>Virus Protection</b>				
FEES	<input type="checkbox"/> HTS	<input type="checkbox"/> Virus Protect				
	Monthly Bill	\$ _____	Installation	\$ _____	<input type="checkbox"/> Cash	
	Estimated Tolls	\$ _____	Membership	\$ 10.00	<input type="checkbox"/> Check #	
	This amount x 1.5	\$ _____	Deposit	\$ _____	<input type="checkbox"/> Credit Card	
	Deposit	\$ _____	Handling	\$ _____	<input type="checkbox"/> Bill	
PLAN						
	Other \$ _____					
	Total \$ _____					
	<b>Adtran Fiber</b>					
	Splitter Name _____					
FIBER	Splitter # _____					
	IP _____					
	Slot/PON/POS - -					
	Fiber # _____					