



CENTRAL TEXAS TELEPHONE COOPERATIVE, INC.

PO Box 627 * Goldthwaite, TX 76844
www.centex.net (325)648-2237 or (800)535-8904

APPLICATION FOR MEMBERSHIP AND TELEPHONE SERVICE

Please complete and return with an estimated installation / name change fee of \$ _____

Have you had service with our Cooperative before? Yes No If yes, under what telephone number? _____

Type of Service you are requesting: Residential Business

If other than an individual applying for service, please check as applicable: Partnership Corporation Joint Venture

Business Name (if applicable) _____ Business Tax ID # _____ (Required)

Government Agency? Yes No Tax Exempt? Yes No If tax exempt, from which of the following? State Federal 911 TxUSF FUSF

Individual Account Name (Member) _____

Social Security # _____ Driver's License # _____

Is a "joint membership" between husband and wife sought? Yes No

Spouse Name (Required if applying for joint membership) _____

Spouse Social Security # _____ Spouse Driver's License # _____

Billing Address _____ 911 Address (if available) _____

City, State, Zip _____

Do you want your phone bill paid by draft or credit card? Yes No (If yes, an Authorization Form will be mailed)

FEATURES

Custom Calling Features

Table with columns: Feature, Monthly Residential, Monthly Business. Includes Call Waiting, Call Forwarding, 3-Way Calling, Speed Dialing, Touch Tone, and package options.

* Not included in Package Offerings

Optional Services

Table with columns: Service, Monthly. Includes Extended Local Calling, Help Line, Inside Wire Maintenance, Call Answering services, and Additional Mailboxes.

Are you interested in Internet? Yes No
Are you interested in DSL? Yes No

Class Features

Table with columns: Feature, Monthly. Includes Automatic Call Back, Automatic Recall, Anonymous Call Rejection, Selective Call Forwarding, Call Forwarding, Do Not Disturb, Caller ID, and Call Trace.

Table with columns: Package, Monthly. Includes 2 Features (\$3.00), 3 Features (\$4.00), 4 Features (\$5.00).

* Not included in Package Offerings

Optional Blocking Services

Table with columns: Service, Monthly Residential, Monthly Business. Includes Toll Block Collect Calls, Toll Block 3rd Number Calls, Toll Control w/ PIN, Toll Block 1+ and 0+ Calls, Toll Block 900 & 976 calls.

Office use only:

Rev 03/04 Membership # Telephone #
New Member Applicant Date Received Amount \$
Existing Member/Membership Conversion Cash Check # Credit Card

LONG DISTANCE CARRIER

PLEASE SELECT THE LONG DISTANCE CARRIER OF YOUR CHOICE

Please see the attached list and select your IntraLATA and InterLATA long distance carrier.

I choose _____ as my **IntraLATA** long distance carrier.

I choose _____ as my **InterLATA** long distance carrier.

Signature _____

Date _____

DIRECTORY INFORMATION

Do you want your # published in the telephone directory? Yes No (\$1.00 Per Month)

List in Directory as: _____ Directory Address _____

Extra Directory Listings (Monthly \$.25 residence, \$.50business) _____

Last First Middle

If Business, do you desire yellow page listings? Yes No If yes, list heading you prefer (ie., Hardware, Plumbers, Grocers): _____

(You may be contacted by our contracted directory publisher for addtl. information)

AUTHORIZATION TO ENTER PREMISES

I/We do hereby authorize and request that Central Texas Telephone Cooperative, Inc. allow its employees to enter any residence or other building that I/We own for the purpose of installing, repairing or servicing telecommunications equipment when I am not physically present at such residence or other building. This authorization shall remain effective until it is revoked by a written revocation signed by me and filed with the home office of Central Texas Telephone Cooperative, Inc. in Goldthwaite, Texas.

EXECUTED THIS _____ DAY OF _____, 20_____

Signature _____

Spouse Signature (if applicable) _____

LOCATION OF PROPERTY FOR TELEPHONE SERVICE

Telephone number where you may be reached concerning installation _____

Has there been service at this location before? Yes No

If yes, please list the previous occupants' name and telephone number _____

Is the building wired for a telephone? Yes No Is this a Mobile Home? Yes No

Description of Property and House _____

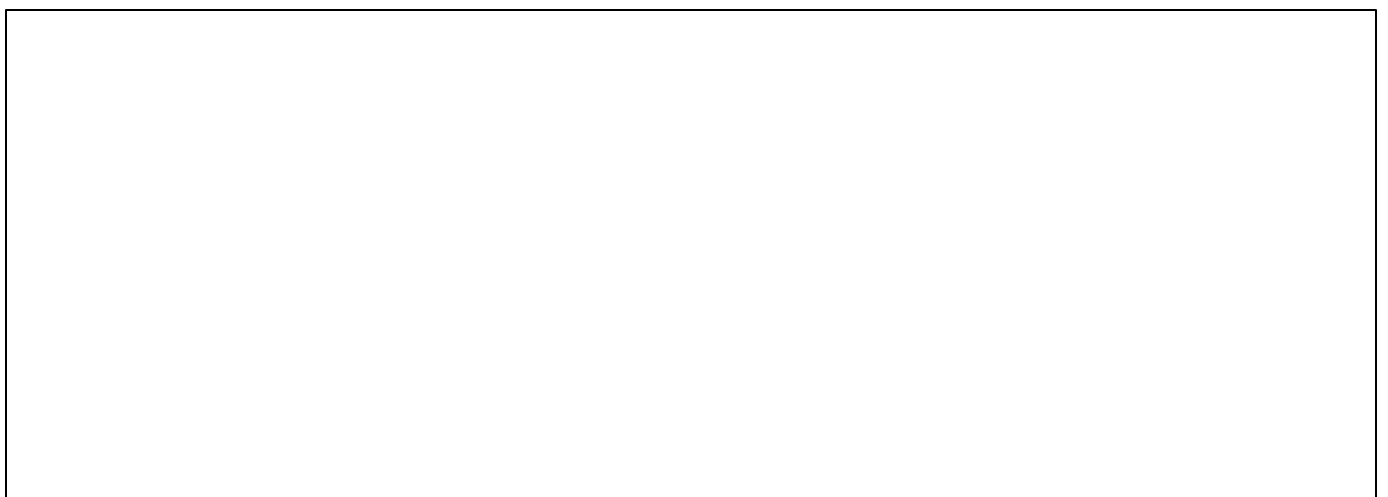
Neighbors or Road on the:

North _____ East _____ West _____ South _____

County Location _____ School District Location _____

If you are not the landowner, please give the landowner's name and phone #, if known. _____

PLEASE HELP US FIND YOUR HOUSE. Using the space below, or on a separate sheet, draw a map of the location where you want service. Indicate highways, county road numbers, and any significant landmarks that may assist us in locating the property.



MEMBERSHIP OPTIONS AND AGREEMENT

One of the following membership options MUST be selected:

1. I have not had phone service with CTTC previously. I wish to procure telephone service from the Cooperative and thereby establish membership with the Cooperative.

Please check one: Single Membership(Individual or Business) Joint Membership

Please note, in order for a husband and wife to hold a joint membership, both parties must sign this application. When both sign, the term “member” shall be deemed to include a husband and wife holding a joint membership and any provisions relating to the rights and liabilities of membership shall apply equally with respect to the holders of the joint membership. The vote of either separately or both jointly shall constitute one vote as a member of the cooperative.

2. I have previously had membership with CTTC as a single individual or business operating under my social security number. My marital status or business form has not changed and I thereby wish to re-establish service under the member number previously assigned to my account.

3. I currently have service with the Cooperative. My marital status has changed and I thereby wish to apply for a new single membership with the Cooperative. I understand that all capital credit allocations under the previous joint membership will remain in the joint names only and **cannot** be transferred to a single membership unless addressed in a divorce decree and provided to the Cooperative.

4. I currently have service with the Cooperative. My marital status has changed and I thereby wish to apply for a new joint membership with the cooperative. I understand that all capital credit allocations under my previous single membership will remain in my name only. Upon my death, these allocations **cannot** be transferred to my spouse. I understand in applying for joint membership that, in order for a husband and wife to hold a joint membership, both parties must sign this application. When both sign, the term “member” shall be deemed to include a husband and wife holding a joint membership and any provisions relating to the rights and liabilities of membership shall apply equally with respect to the holders of the joint membership. The vote of either separately or both jointly shall constitute one vote as a member of the cooperative.

5. I currently have service with the Cooperative. My marital status has changed and I thereby wish to convert my single membership to a joint membership as provided in the Cooperative’s By-Laws Article 1 Section 4(a) which states that “A membership may be converted to a joint membership upon the request of the holder thereof and the agreement by such holder and his or her spouse to comply with the articles of incorporation, By-Laws, and any rules and regulations adopted by the Board.” I understand that the membership certificate shall be reissued by the Co-op in such a manner as shall indicate the changed membership status and that all capital credit allocations under my single membership will be transferred from my single membership to my joint membership from the date of original application continuing until disconnection of telephone service. Upon death of either spouse who is a party to the joint membership, such membership shall be held solely by the survivor.

6. I currently have service with the Cooperative and hold a joint membership with my deceased spouse. I wish to convert the joint membership to a single membership in accordance with Article 1, Section 4(b) of the Cooperative’s By-Laws which state “Upon the death of either spouse who is a party to the joint membership, such membership shall be held solely by the survivor. The outstanding membership certificate shall be surrendered, and shall be reissued in such manner as shall indicate the changed membership status, provided, however, that the estate of the deceased shall not be released from any debts due the Co-Op.”

7. I currently receive service with the Cooperative through the single membership of my deceased spouse. I understand that all capital credit allocations under the single membership of my deceased spouse shall remain in that name only and **cannot** be transferred to me. However, I wish to continue receiving telephone service from the Cooperative and thereby request to establish a single membership with the Cooperative. In doing so, I understand that I may still have the directory listing in the name of my deceased spouse or other listing that I may choose.

The undersigned (hereinafter called the “Applicant”) hereby applies for membership in and agrees to take telephone service from a corporation organized under the laws of the State of Texas under the name of Central Texas Telephone Cooperative, Inc. (hereinafter called “Cooperative”), for the purpose of furnishing telephone service, upon the following terms:

1. The Applicant will pay upon signing this application, an estimated installation fee as set forth in the General Exchange Tariff of the Cooperative. An additional deposit may also be required to establish credit.
2. The Applicant will, when telephone service becomes available, take from the Cooperative, telephone service to be used on the premises described herein and will pay monthly at rates to be determined from time to time in accordance with the procedure specified in the By-Laws of the Cooperative. It is expressly understood that all amounts paid by the Applicant in excess of the operating costs of the Cooperative are furnished by the Applicant as capital and the Applicant shall be credited with the capital so furnished as provided by the By-Laws.
3. By signing this application, providing the Applicant is the owner, the Applicant does grant to the Cooperative a right-of-way easement of not less than twenty (20) feet wide to construct, operate and maintain a telephone line or system on the land described, to cut and trim trees and shrubbery that may interfere with or threaten to endanger the operation and maintenance of said line or system and in or upon all streets, roads or highways abutting said land.
4. The applicant will comply with and will be bound by the provisions of the Charter and By-Laws of the Cooperative and such rules and regulations as may from time to time be adopted by the Cooperative.
5. The Applicant, by becoming a member, assumes NO personal liability or responsibility for any debts or liabilities of the Cooperative, and it is expressly understood that his private property is EXEMPT from execution for any such debts or liabilities.
6. Applicant agrees that venue will be fixed in state district court in Mills County, Texas for the resolution of any and all types of claims or conflicts between Applicant/Member and the Cooperative.
7. All payments are due and payable at the Cooperative’s place of business or as stated on your telephone bill.
8. The Cooperative may, at any time, and at its sole discretion, revoke the privilege of extending credit to the Applicant for future services.
9. The Cooperative, or its designee, is expressly authorized to investigate any references, and other information furnished by the undersigned Applicant, or by any other person or entity pertaining to the undersigned Applicant’s creditworthiness.
10. This application authorizes the Cooperative or its designee to verify Applicant’s creditworthiness by obtaining a credit report, or by directly contacting banks, lending institutions, and suppliers in connection with this application or later in connection with an update, and specifically agrees to a continuing verification as to any trade, credit or bank reference by the Cooperative from year-to-year until said account is paid in full, or this authorization is revoked in writing.
11. If any clause or provision of this Application is found to be invalid or is incapable of being enforced by any rule of law or public policy, all other clauses and provisions shall, nevertheless, remain in full force and effect.

Applicant Signature (Individual or Business)

Printed Name (and title, if business)

Date

Spouse Signature (required for joint membership)

Printed Name

Date