CML TELEPHONE COOPERATIVE

208 Eagle Street

PO Box 18

Meriden, IA 50137-0018

Phone (712) 443-8222

APPLICATION FOR SERVICE

BILLING INFORMATION	N: Person Responsible for	payment and	l authorized	to make changes to account	
MEMBERSHIP NAME				MEMBERSHIPS ISSU	ED IN ONE NAME ONL
OC SEC #		EMPLOYER			
ORK / CELL NUMBER	WHERE YOU CAN BE REA	CHED			
TREET	PREVIOUS TEL NUMBER				
о вох	PREV TELEPHONE COMPANY				
CITY, ZIP					
ERVICE ADDRESS: Phy	rsical Address of Phone Lin	e (REQUIRED):		
HONE BOOK LISTING:	Complete as you wish to		-		
	Leave this section blank or NON-PUBLISHED NU	-	an UNLISTEI	D NUMBER	
	Of NON-POBLISHED NO	IVIDEK			
IAME/S					
TREET				***OPTIONAL***	
о вох					
CITY, ZIP				_City is required in phone bo	ook
ANDATORY MONTH	LY CHARGES:			MISCELLANEOUS	
		BUSINESS	BUSINESS	-	
	RESIDENTIAL		MULTI-LINE	HOOKUP FEE	\$7.00
ccess Line	\$20.00	\$22.00	\$22.00	FEATURE HOOKUP F	
ederal Access Charge -911 Surcharge	\$6.50 \$1.00	\$6.50 \$1.00	\$6.50 \$1.00	RETURNED CHECK FI RECONNECT FEE	EE \$10.00 \$7.00
_	ARGES WILL BE APPLIED	\$1.00	J1.00	RECONNECTIE	\$7.00
PLUS APPLICABLE TAXES			PLUS APPLICABLE TAXES		
Nire Maintenance A	Agreement? Yes / No-	\$0.50 per n	nonth - Incl	udes maintenance of wirir	ng inside home
	BILLS ARE DU	JE ON TH	E 20TH O	F EACH MONTH	
he following features ca	n be provided at your reques	t at NO extra c	harge: Please	e indicate your selections with '>	('
	International calls blocked			Collect calls blocked	
	900 # calls blocked				ge Carrier freeze (PIC)
				Separate	Form Required
AP	PLICANT SIGNATURE	-:	DATE	DATE SERVICE TO BI	EGIN
		FOR OFFICE		1	
	ASSIGNED PHONE #	FOR OFFICE	. OJE ONLI		
	DEPOSIT REQUIRED	-			BELLICED OCT 3013
	DEI OSH NEQUINED				REVISED OCT 2017