

APPLICATION FOR MEMBERSHIP

Installation & Connection charges may apply, for details regarding these charges, please contact our office at 320-393-2115.

Reminder: Payment for connection charge and completed application required prior to installation.

(320) 393-2115 or Fax 320-393-2221 www.bctelco.net

APPLICANT: Responsible for account	CO-APPLICANT: Responsible for account	
First Middle Initial Last	First Middle Initial Last	
Social Security #	Social Security #	
Driver's License #	Driver's License #	
Daytime Contact #	Daytime Contact #	
Email Address:	Email Address:	
Account Security Information: (to access account information)	Additional Authorized Contacts:	
Password:Create something you will remember	If you would like anyone else to have information on your account or make changes, please list their name below:	
City where you were born?	Additional Authorized Contact:	
What is your favorite color?	Additional Authorized Contact:	
INSTALLATION INFORMATION:		
Address Service Requested at:		
Address	City State Zip Code	
Billing Address if different: Address	City State Zip Code	
Have you previously had service with Benton Communications		
I have a security system. Yes No		
CREDIT REFERENCES:		
Benton Communications uses Online Utility Exchange for customer credit checks. A deposit may be required based on your credit record. If the report requires you to pay a deposit, it must be paid prior to establishing service.		
AUTOMATIC PAYMENT:		
Please attach/include a voided check from the account you would like the payment to be withdrawn.		
E-Bill Yes No		
Email Address to send bill to:		

CABLE PLACEMENT RELEASE SECTION: * ONLY NEED TO FILL OUT IF NEW CONSTRUCTION OR LOCATION HAS **NEVER HAD BENTON SERVICES.**

In a continued effort to protect your underground utilities, it is important that you understand the placement process of the following services: Telephone, Internet and/or TV Cable Installation.		
commercial utilities buried near our proposed re	rground cable, we flag a proposed route. We then call Gopher State One Call which locates the oute. It is the <u>owner's responsibility</u> to notify Benton Communications of any other service that diagram below. An example would be privately placed facilities such as gas, electric, sewer, well,	
If you have any concerns with the proposed rout	e or any questions, please contact us at (320) 393-2115 or (800) 683-0372.	
bury cable. It is my responsibility to inform the	, assume all responsibility for my privately placed underground facilities (gas erground wiring, etc.) located on my property upon which Benton Communications is going to company by completing the diagram below regarding the location of these private underground disclosed privately buried facilities, the repairs will be at the property owner's expense.	
Name:	Contact Phone # (if applicable):	
PLEASE DRAW A DIAGRAM OF YOUR BURIED SERVICES BELOW.		
The undersigned (hereinafter call the "Applicant" must be 18 years or older to Telephone Company (hereinafter called the "Cooperative"), for the purpose of	apply), hereby subscribes to membership in a corporation, organized under the laws of the State of Minnesota under the name of Benton Cooperative furnishing communication service, upon the following terms and conditions:	
	ticles of Incorporation or by-laws of the Cooperative (found in the Cooperative telephone directory) and pay any installation charge or deposit requested.	
	es available, take from the Cooperative communication service to be used on the premises described below and will pay therefor monthly at rates to be shed tarriffs as fixed by the Board of Directors, it being expressly understood that all amounts paid for services by Applicant in excess of costs are furnished	

- by the Applicant as capital and the Applicant shall be credited with the capital so furnished as provided in the by-laws.
- 3. The Applicant hereby grants to the Cooperative an easement to construct, operate and maintain a communication line or system on, over, or under the land described below and in or upon all streets, roads or highways abutting said land. The Applicant further agrees that in the event that said Applicant does not own all private land or lands necessary to be crossed, as state above, the Applicant shall obtain, on forms provided by the Cooperative, all necessary easements from the owner or owners of said land or lands, and shall submit same to said Cooperative prior to installation of service. Applicant hereby grants to the Cooperative access to the premises of Applicant at all reasonable times for its purpose of installing, repairing, maintaining or removing any service to the premises.
- 4. The Applicant will comply with and be bound by the provisions of the Articles of Incorporation and by-laws of the Cooperative, and such rules and regulations as may from time to time be adopted by the Coopera-
- 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.

This application is made in consideration of similar applications by others and is understood to be an agreement with such applicants. The acceptance of this application by the Cooperative shall constitute an agreement between the Applicant and the Cooperative, and shall continue in force from the date service is made available by the Cooperative to the Applicant, and thereafter until service is discontinued. Congratulations! You will be a member of a cooperative. Capital Credit checks are made payable to applicant(s) listed below.

It is agreed that if that an adverse credit rep to the Applicant withou osit made if applicable

the Cooperative is unable to proceed with its plans to service the Applicant for any reason, the a ort or failure to meet payment of charges in accordance with established collection policies of the previous notice. The Applicant also agrees if they had service before, and there was a balance before service will be provided.	ne Cooperative, shall be sufficient cause for the Cooperative to refuse or discontinue service
I have read this application and ag	ree to abide by the terms thereof:
Date:	Date:
Applicant's Signature	Co-Applicant's Signature