



**FARMTTEL COMMUNICATIONS**  
YOUR COMPLETE COMMUNICATIONS PROVIDER

As your new service provider, we want to make sure that we have all of your information accurate and up to date.

Please take a moment to look over your information when you receive your first bill, if you notice anything that is incorrect or out of date, please let us know what corrections we need to make. In addition, we ask for your birthday and social security number for credit and security purposes.

For your convenience, we have included this form that you can mail back with your payment with any corrections or updates we need to make to your account. If you would prefer you may call us with any of this information or questions, during our normal business hours.

If there are any channels or services not currently offered please let us know, as we are willing to consider these during future upgrades and changes on your network.

Please fill out the information below and return with your payment or contact our office.

---

Name: (As it should read on the account) \_\_\_\_\_

Service Address: \_\_\_\_\_

Billing Address: (If different than the service address)

\_\_\_\_\_

Home Phone: \_\_\_\_\_

Daytime or Cell Phone: \_\_\_\_\_

Person or Persons that are allowed to make changes to this account:

\_\_\_\_\_

\_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Current Email Address: \_\_\_\_\_