



ANYTHING AND EVERYTHING ON THE NETWORK

One Barnes Park South Wallingford, CT. 06492
Phone: 877-246-AEON Fax: 877-312-5544

Local/LD: Centrex 1100 "CT ONLY"
Service Order

1. Customer Information

Customer Name _____
(Name must be as it appears on phone bill) Customer Type Business Residential
Address _____ City _____ State _____ Zip _____
Billing Telephone Number (Required) _____ (Write "New" if requesting a new number)
Billing Address if different than Customer Address: _____
City _____ State _____ Zip _____
Contact Name _____
Contact Number _____ Alternate Number _____
E-mail Address _____ @ _____

2. Service

Order Activity: New Migrate as is Migrate with Changes Disconnect Move
Term Commitment: 12 Months 24 Months 36 Months
Class of Service: Class 1 Class 2 Class 3 Class 4 Class 5
Number of Lines: Monthly Recurring Charges: Intrastate:
NRC Install Charge per Line: Interstate:
International: Vary and subject to change
Common Equipment Rate-Per System: \$5.00

Centrex 1100 Standard Feature Pkg	Standard without Call Waiting	Standard with Call Waiting
Station Hunting	Call Waiting	Call Forward-Busy
Three Way Calling	Call Forward-Don't Answer	Direct Inward Dialing
	Consultation	Direct Outward Dialing

Additional Features:

_____ Monthly Recurring Charges NRC per Feature

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TN: _____ Hunting SEQ: _____ TN _____ Hunting SEQ: _____
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Total MRC: Total NRC:

(Total MRC does not include, Multi-line charge and FSLC (Federal Subscriber Line Charge) or other taxes and fees that may apply)

3. Summary of Order or Additional Comments

4. Customer Authorization

This Centrex Local and LD Service Order is subject to the Terms and Conditions within the Letter of Authorization Service Agreement. By executing below you acknowledge acceptance of such terms and conditions.

The person(s) signing this agreement is authorized to sign on behalf of the customer.

Authorized Signature _____ Date _____

Printed Name _____

5. Agent Information

Agent Name: _____ Agent ID: _____ External ID _____