

NewPhone

LIFELINE AND LINK-UP APPLICATION

RECEIVE (\$13.45 IN AL, FL, GA, LA, MS, NC, SC, TN, KY) OFF YOUR MONTHLY SERVICE

Lifeline is a program designed to increase the availability of telecommunications services to low income subscribers by providing a credit to monthly recurring local service for qualifying residential subscribers. Link-Up provides a credit on the non-recurring installation and service charges to qualifying residential subscribers.

APPLICANT: " Lifeline benefits are limited to a single line of service per residence. You may not receive multiple Lifeline or Link Up discounts. You may apply your Lifeline discount to either one landline or one wireless number, but you cannot have the discount on both. " (Address must be your principal residence)

Name: Last _____ First _____ M _____
(NAME BENEFITS ARE RECEIVED IN)

Address: Street _____ Apt # _____

City _____ State _____ Zip _____

- I do not currently have telephone service.
 I currently have telephone service.

Phone: (_____) - _____ - _____ Current provider (telephone company) _____

I currently receive monthly Lifeline assistance for the above phone line.
(Note: Lifeline assistance may only be applied to one phone line at your principal residence)

I previously received Link-Up assistance at the above address.
(Note: You may not receive Link Up assistance more than once at the same principal residence).

A member of my household previously received Link-Up assistance at the above address.

ELIGIBILITY REQUIREMENTS (please complete each section that applies)

- I currently participate in or receive benefits from the following programs (check all that apply):
- Medicaid (All BellSouth States, except TN)
 - TennCare Medicaid (TN only)
 - Low-Income Home Energy Assistance (LIHEAP) AL, FL, GA, KY, LA, NC, MS, TN
 - Food Stamps (All BellSouth States)
 - National School Lunch Program's free lunch program (must qualify for free lunch). FL, KY, LA, MS, TN
 - Supplemental Security Income (SSI) All BellSouth States except SC
 - Federal Public Housing Assistance (SECTION 8) AL, FL, GA, KY, LA, MS, NC, TN
 - Temporary Assistance for Needy Families (TANF) All BellSouth States
 - Household Income based on Federal Poverty Guidelines * **Must provide proof of income with application to qualify*** (FL, LA, MS, TN)
 - Senior Citizens discount plans offered by the local gas or power company (GA only)

CERTIFICATION

I understand that I must meet the above requirements to receive Lifeline or Link-Up benefits. I understand that these are only available for a single telephone line at my principal residence and that I may not receive Link-Up benefits more than once at the same residence. I understand that completion of the application does not constitute immediate enrollment in the Lifeline or Link-Up programs. I consent to the release of my personal information as may be required for the administration of the Lifeline or Link-Up programs. I agree to notify my local telephone company when I am no longer participating in any of the above-designated program(s).

I DO NOT CURRENTLY RECEIVE LIFELINE SUPPORT FOR A LAND OR WIRELESS LINE SERVING MY RESIDENTIAL ADDRESS. NO OTHER RESIDENT AT MY ADDRESS PARTICIPATES IN THE LIFELINE PROGRAM; OTHER WISE I AGREE TO CANCEL MY CURRENT HOUSEHOLD LIFELINE SUPPORT PROVIDED IN FAVOR OF NEWPHONE.

"By signing below, I hereby agree to all terms and conditions listed at www.newphone.com, including without limitation those terms and conditions set forth in all applicable Image Access, Inc. d/b/a NewPhone tariffs, each as may be amended from time to time."

I HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT.

Signature _____ Date _____

I am an Authorized Representative for this applicant and I am submitting this form on behalf of this applicant. I am willing to assist this applicant in seeking telephone service benefits.

Authorized Representative Name (please print) _____

Signature _____ Date _____