



**Appalachian Wireless Affordable Connectivity Program (ACP) Enrollment Form**

This signed Affordable Connectivity Program (ACP) Enrollment Form is required to enroll you in Appalachian Wireless' ACP Program. The National Verifier, not Appalachian Wireless, determines your eligibility to receive ACP. **Only persons who have been determined to be eligible by the USAC National Verifier should complete this Enrollment Form.** If you have not qualified for ACP through the USAC National Verifier, please visit: [GetInternet.gov](https://www.getinternet.gov) to apply, or complete and submit your paper application. The information you enter on this Enrollment Form must be the same as what you provided to the National Verifier to receive eligibility approval, which expires after 45 days.

**PERSONAL INFORMATION**

NATIONAL VERIFIER APPLICATION ID: \_\_\_\_\_ NATIONAL VERIFIER EXPIRATION DATE (OPTIONAL): \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
FIRST NAME: \_\_\_\_\_ MI: \_\_\_\_\_ LAST NAME: \_\_\_\_\_  
DATE OF BIRTH: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ LAST 4 DIGITS OF SOCIAL SECURITY NUMBER: \_\_\_\_\_  
CONTACT PHONE NUMBER: \_\_\_\_\_ APPALACHIAN WIRELESS PHONE NUMBER (IF APPLICABLE): \_\_\_\_\_

**RESIDENTIAL ADDRESS**

*Must be a street address (not a P.O. Box) and your principle residence.*

STREET ADDRESS: \_\_\_\_\_ APT: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

*Check here if the billing address is the residential address. Billing address may contain a P.O. Box.*

BILLING ADDRESS: \_\_\_\_\_ APT: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**QUALIFICATION THROUGH DEPENDENT**

*Complete if you are qualifying through a child or dependent in your household.*

FIRST NAME: \_\_\_\_\_ MI: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ LAST 4 DIGITS OF SOCIAL SECURITY NUMBER: \_\_\_\_\_

**BENEFIT TRANSFER REQUEST** (if applicable)

I currently receive ACP benefits from another carrier, and I request that Appalachian Wireless submit a Benefit Transfer on my behalf.

*If this box is checked, you must also complete and submit a Consent to Transfer Form.*

**CERTIFICATIONS**

I authorize government agencies and their authorized representatives to discuss with, receive from and provide information to Appalachian Wireless that is relevant to my eligibility to receive ACP benefits from Appalachian Wireless. I consent and give permission for Appalachian Wireless to transmit any of my personal information disclosed on this Enrollment Form to verify my eligibility with the Universal Service Administrative Company. This is necessary for the proper administration of the ACP.

I affirm and understand that the ACP is a federal government subsidy that, subject to continued eligibility, reduces my broadband internet access service bill and at the conclusion of the program, my household will be subject to Appalachian Wireless' undiscounted general, rates, terms, and conditions if my household continues to subscribe to the service.

By my signature below, I certify that the information provided above is true and correct, and agree to the above Certifications. Having reviewed the Notices and Disclosures on the reverse side of this Enrollment Form, I consent to enroll with Appalachian Wireless.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

**SUBMISSION INSTRUCTIONS**

*This form must be completed in its entirety and presented in person at an Appalachian Wireless retail store or authorized dealer. If further assistance is needed, please call (800) 438-2355.*

For Billing use only:  
RSA/Dealer \_\_\_\_\_ Retail/Dealer Location \_\_\_\_\_  
Benefit Transfer Request Needed: Yes No  
If "yes," initial to verify that separate Consent to Transfer Form has also been received: \_\_\_\_\_  
If "yes," Benefit Transfer Submitted: Yes No  
Household Worksheet Needed: Yes No  
Date Enrollment Completed: \_\_\_\_\_ Completed By: \_\_\_\_\_

## **Appalachian Wireless<sup>1</sup> Affordable Connectivity Program (ACP) Disclosures**

### **What is the Affordable Connectivity Program?**

The Affordable Connectivity Program (ACP) is a long-term federal government benefit program operated by the Federal Communications Commission (FCC) that is intended to reduce a qualifying household's broadband internet access service bill by up to \$30.00 per month. If the ACP ends or when the household is no longer eligible, customers will be subject to Appalachian Wireless' regular rates, terms, and conditions.

### **Who is eligible for the ACP?**

A household can qualify for the ACP by showing that at least one member of the household meets **one** of the following criteria:

- Participates in the FCC's Lifeline program or a qualifying government program such as: Supplemental Nutrition Assistance Program (SNAP), Medicaid, Supplemental Security Income (SSI), Federal Public Housing Assistance (FPHA), Veterans Pension and Survivors Benefit, or Special Supplemental Nutritional Program for Women, Infants, and Children (WIC)
- Has a household income at or below 200% of the Federal Poverty Guidelines for a household of that size;
- Is approved to receive benefits under the free and reduced-price school lunch program or the school breakfast program, including through the USDA Community Eligibility Provision; or
- Received a Federal Pell Grant in the current award year.

The ACP is non-transferable and is limited to one monthly service discount per eligible household. Appalachian Wireless offers the ACP benefit only in its service areas in Kentucky, Virginia, and West Virginia.

### **What plans are eligible for the ACP?**

The ACP can be applied to any plan that includes broadband data. Appalachian Wireless also offers a plan exclusively for customers participating in the ACP – the 5GB ACP Plan. Beginning with the first complete billing cycle after enrollment, the monthly service fee (\$30.00, inclusive of all taxes and surcharges) will be fully covered by the ACP discount. Customer may be responsible for pro-rated charges for the partial first and last month. Please visit [www.appalachianwireless.com/acplan](http://www.appalachianwireless.com/acplan) for full information, terms, and conditions.

### **Important Disclosures**

- (i) The ACP is a government program that reduces the customer's broadband internet access service bill by up to \$30.00 per month;
- (ii) The household may obtain ACP-supported broadband service from any participating provider of its choosing;
- (iii) The household may apply the ACP benefit to any broadband service offering of the participating provider at the same terms available to households that are not eligible for ACP-supported service;
- (iv) Appalachian Wireless may disconnect the household's ACP-supported service after ninety (90) consecutive days of non-payment;
- (v) The household will be subject to Appalachian Wireless' undiscounted rates and general terms and conditions if the ACP ends, if the consumer transfers their benefit to another provider but continues to receive service from Appalachian Wireless, or upon de-enrollment from the ACP; and
- (vi) The household may file a complaint against Appalachian Wireless via the FCC's Consumer Complaint Center.

### **Can I transfer the ACP benefit to another carrier?**

Households may obtain broadband service supported by the ACP from any participating carrier of their choosing, and households may transfer their ACP benefit to another provider at any time.

### **No Early Termination Fees**

You cannot be charged an early termination fee if you cancel your ACP service. However, please be aware that if you are on the Advantage Plan and have signed a Device Installment Agreement, you must either carry an active service plan or pay the remaining installment balance for your device.

### **Nonpayment**

Failure to timely pay the remaining balance after discount will result in hotline, suspension, or disconnection of all lines other than the line associated with the ACP discount. The line associated with the ACP discount will be downgraded to the 5GB ACP Plan or other plan that is fully covered by the \$30 ACP benefit.

### **Usage**

If your ACP service is fully covered by the ACP benefit and other applicable discounts/benefits and you are not invoiced for a monthly balance, you must use your service at least once every thirty (30) days or face possible de-enrollment. Usage includes completion of an outbound call, answering an incoming call from someone other than an Appalachian Wireless representative, usage of data, and/or sending a text message, among other things.

### **How can I enroll?**

Determine if your household is eligible by applying through the USAC National Verifier. The application can be accessed online at: [GetInternet.gov](http://GetInternet.gov). If your household is eligible, you will receive a National Verifier ID Number. Complete the Appalachian Wireless Enrollment Form, and bring your completed form to any Appalachian Wireless retail store or dealer. Your Appalachian Wireless Enrollment Form must be in the same name as your National Verifier application.

### **Further Information**

If you have any questions, please visit a retail store or authorized dealer or contact Customer Service at (800) 438-2355 or by dialing 611 from your Appalachian Wireless phone.

---

<sup>1</sup> A copy of Appalachian Wireless' Terms and Conditions of service may be obtained by visiting [www.appalachianwireless.com/misc/tnc.pdf](http://www.appalachianwireless.com/misc/tnc.pdf), or at any retail store. and applies to all existing or newly activated service.