



Highland Telephone Cooperative, Inc.
7840 Morgan Co Hwy
PO Box 119
Sunbright, TN 37872
(423) 628-2121

Business Application for Membership and Telephone Service

Business Name: _____

911 Address: _____

Mailing Address: _____

Sole Proprietorship [] Partnership [] Corporation [] LLC []

List Owners, Partners and Principal Officers as applies to your type of business
Name Address Phone Number Social Security Number

Contact Number Where You May Be Reached: _____

Has the business had service with us before? Yes [] No []

If yes, what was the number? _____

Has present location ever had service with us before? Yes [] No []

Who occupied location before you? _____

All applicants please enclose \$10 for membership. You will be billed for any installation charges on your first billing statement. Your credit may be checked with the credit bureau. If credit is unacceptable, you may be required to pay an advanced deposit and installation fee.

TN Customers Only: Do you reside in the City Limits? Yes [] No []

KY Customers Only: What fire district do you live in?

- 3-1 North McCreary 3-2 Central McCreary 3-3 South McCreary
3-4 Eagle Sawyer 3-5 West McCreary 3-6 McCreary County East



Broadband services available with speeds up to Certified GIG!
Inquire with any Customer Service Representative.



The undersigned (hereafter called "the Applicant") hereby applies for membership and agrees to take telephone service from a corporation organized under the laws of the State of Tennessee, under the name of Highland Telephone Cooperative, Inc. The applicant will grant the Cooperative a right of easement to conduct, operate, and maintain a telephone line on the property where the Applicant receives telephone service. The applicant, by becoming a member, assumes no personal responsibility for any debts or liabilities of the Cooperative, and is expressly understood his private property is exempt from the execution for any such debts or liabilities. The Applicant hereby agrees that in the event of default in the payment of any amount due, and if the account is placed in the hands of an agency or attorney for collection of legal action, to pay an additional charge equal to the cost of collection including agency and attorney fees and court costs incurred and permitted by laws governing these transactions.

Date: _____ Applicant's Signature: _____

This institution is an equal opportunity provider and employer.