SWC TELESOLUTIONS

INTERNET SERVICE CONFIRMATION ORDER FORM

Offered by SWC Telesolutions, Inc., a division of Sacred Wind Enterprises, Inc.

Billing Name: _____

Account Number: _____

Telephone Number: _____

SSID: _____
Service Set Identifier

Wifi Password: _____

ADVANCE PAYMENT IS DUE PRIOR TO INTERNET SERVICE CONNECTION, IN THE AMOUNT OF ANY PRORATION FOR THE CURRENT MONTH.

Create an SSID (device username) & password to identify your wireless device.

Would you like to sign up for paperless billing?
If so, please provide your email address: _____

INTERNET SERVICE PLANS

RESIDENTIAL SERVICE PLAN

FREE MODEM

☐ Up to 15 M	$65.00
☐ Up to 25 M	$75.00
☐ Up to 50 M	$85.00
☐ Up to 75 M	$95.00
☐ Up to 100 M	$110.00

Installation charges may apply.

- Not all speeds are available in all locations.
- Customer must also subscribe to voice service at same location.
- High-speed internet subject to availability of facilities and capacity.
- Terms & Conditions apply.

BUSINESS SERVICE PLAN

FREE MODEM

☐ Up to 25 M	$100.00
☐ Up to 50 M	$150.00
☐ Up to 75 M	$175.00
☐ Up to 100 M	$200.00

(Business Service includes 1 Static IP Address, higher upload speeds and expedited trouble treatment.)

Installation charges may apply.

- Not all speeds are available in all locations.
- Customer must also subscribe to voice service at same location.
- High-speed internet subject to availability of facilities and capacity.
- Terms & Conditions apply.

See TERMS AND CONDITIONS Sheet

By signing, I acknowledge that I have read, understand, and agree to pay all one-time and monthly recurring fees applicable to the Service Plan which I have selected above, and that I have read, understand and agree to all **Terms and Conditions**.

_____
Customer Signature

_____
Date

_____
Customer Service Representative

When you have completed and signed this form, and the form on the next page if applicable, simply click on the blue "SUBMIT FORM" button on the next page to e-mail your form.

Toll Free (877) 722-3393 Fax (505) 905-6001

875-E US Hwy 491 Yatahey, NM 87375

CERTIFICATE OF EXEMPTION

Completion of this certificate will exempt you from the following taxes and surcharges that are imposed on charges for telecommunications services furnished by Sacred Wind Communications, Inc.:

- **State, County and Local Gross Receipts Tax (Sales Tax)**
- **State Rural Universal Service Surcharge**
- **State E911 Surcharge**
- **State Telecommunications Relay Network Surcharge**

THE UNDERSIGNED CERTIFIES THAT SUCH EXEMPTION IS ALLOWABLE BY LAW FOR THE REASON THAT CUSTOMER IS AN ENROLLED MEMBER OF THE:

_____ _____

Recognized Native American (Indian) Tribe *Tribal ID/Census Number*

AND IS CURRENTLY LIVING AND/OR DOING BUSINESS ON THE BELOW-NAMED RESERVATION:

_____

Recognized Native American (Indian) Reservation

CUSTOMER INFORMATION:

Name_____

Customer's Name or Business Name

Mailing Address_____

(Street) *(City)* *(State)* *(Zip)*

Physical Address_____

(Street) *(City)* *(State)* *(Zip)*

Telephone Number(s): _____

(include area code) *(If necessary, list additional telephone numbers on back.)*

CUSTOMER IS (CHECK ONE):

- ☐ **An enrolled tribal member**
- ☐ **Tribal Government Agency**
- ☐ **Business Wholly Owned by the Tribe or Tribal Member**

IF THE CUSTOMER IS A BUSINESS, PLEASE CHECK ONE OF THE FOLLOWING:

- ☐ **Corporation**
- ☐ **Sole Proprietorship or Individual**
- ☐ **Partnership**

BY SIGNING BELOW, I AFFIRM THAT ALL OF THE INFORMATION PROVIDED ON THIS FORM IS CORRECT TO THE BEST OF MY KNOWLEDGE.

_____ _____

Signature **Date**

RETURN COMPLETED CERTIFICATE TO: newservice@sacred-wind.com or mail to:

Sacred Wind Communications
Tax Exemption Certificate
PO Box 4011
Yatahey, NM 87375-4011

SUBMIT FORM

7.3.19