

UNIVERSAL LIFELINE TELEPHONE SERVICE
SELF-CERTIFICATION FORM

IMPORTANT NOTICE

UNIVERSAL LIFELINE SERVICE

Effective July 1, 1984, a new discount service will be available to all residence customers who meet eligibility rules established in compliance with a new California law. (Moore Universal Telephone Service Act; AB 1438, Ch. 1143, 1983)

Customers meeting the eligibility rules established by the California Public Utilities Commission will be offered basic flat rate service, at discounted rates, as summarized below:

1. A discount of 50% on monthly residence exchange rates. (Either single-party or multi-party service is eligible, however, Foreign Exchange service is not eligible for this discount.)
2. A one-time per year 50% discount on connection charges.
3. A 75 cent per month credit to defray the cost of telephone set rental or ownership.

ELIGIBILITY RULES ARE:

1. The discount service must be the only service at your residence and it must be your principal place of residence.
2. Total household income must not exceed \$11,000 annually.

If you wish to have further information regarding this service, please call our Business Office at 916-357-2231.

If you qualify and wish this service, please sign this page, and return it with your bill payment.

I certify that I meet the above eligibility rules and apply for the new UNIVERSAL LIFELINE SERVICE. I understand that the Public Utilities Commission may authorize verification of my eligibility.

SIGNATURE

DATE

ADDRESS

TELEPHONE NUMBER

(To be inserted by utility)

Issued by

(To be inserted by Cal. P.U.C.)

Advice Letter No. 60

K. J. Waters

Date Filed

Decision No. 84-04-053

NAME
President

Effective July 1, 1984

Resolution No.

SPECIAL NOTICE - NONCOMPLIANCE WITH RULE 11

(N)

CUSTOMER'S NAME
ADDRESS

Dear _____,

We know how important your telephone is to you and want to do everything we can to continue your service. However, you may not be in compliance with our tariffs filed with the California Public Utilities Commission (CPUC), which state:

"The Utility may not discontinue or deny service at a premises where services provided to a prior customer were disconnected for nonpayment, except where it is found that the delinquent customer still resides at that same premises."

There is an outstanding bill of \$ _____, regarding services rendered to a prior customer at your premises. We must hear from you or receive full payment within 5 days, or service will be disconnected. To restore your service, a restoral charge of \$ _____, and a deposit of \$ _____, will be required in addition to the outstanding bill.

If you still disagree after calling the office, send the disputed amount to the CPUC, to avoid being disconnected. Include with your payment, a statement supporting your belief. The Commission will investigate this matter and advise us of its findings. Their address is State Building, 350 Mc Allister Street, San Francisco, California 94102, Attention Mrs. T. Ghee.

Thank you for your cooperation.

Sincerely,

NAME OF COMPANY

(N)

(To be inserted by utility)

Issued by

(To be inserted by Cal. P.U.C.)

Advice Letter No. 69

K. J. Waters

Date Filed DEC 16 1985

Decision No. _____

NAME

President

Effective JAN 16 1986

TITLE

Resolution No. _____

WRITTEN STATEMENT REGARDING FORMER BUSINESS CUSTOMER'S OCCUPANCY

(N)

DATE: _____

NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

I, the undersigned, certify that _____ (name) _____, the former customer of the Utility at _____ (address) _____ was, and is not occupying the premises or affiliated with the above business.

In the event that this statement is falsified, I then may be held liable for the entire delinquent bill owed the Utility by the previous customer and shall also be liable for a deposit in accordance with the Utility's tariffs.

APPLICANT SIGNATURE: _____

DATE: _____

(N)

(To be inserted by utility)

Issued by

(To be inserted by Cal. P.U.C.)

Advice Letter No. 69

K. J. Waters

Date Filed DEC 16 1985

Decision No. _____

NAME
President

Effective JAN 16 1986

Resolution No. _____

TITLE

WRITTEN STATEMENT REGARDING FORMER RESIDENCE CUSTOMER'S OCCUPANCY

(N)

DATE: _____

NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

I, the undersigned, certify that _____ (name) _____, the former customer of the Utility residing at _____ (address) _____ was, and is not a member of this household.

In the event that this statement is falsified, I then may be held liable for the entire delinquent bill owed the Utility by the previous customer and shall also be liable for a deposit in accordance with the Utility's tariffs.

APPLICANT SIGNATURE: _____

DATE: _____

(N)

(To be inserted by utility)

Issued by

(To be inserted by Cal. P.U.C.)

Advice Letter No. 69

K. J. Waters

Date Filed DEC 16 1985

Decision No.

NAME
President

Effective JAN 16 1986

Resolution No.

TITLE