



Affordable Connectivity Program (ACP)

The benefit provides a discount of up to \$30 per month toward internet service for eligible households and up to \$75 per month for households on qualifying Tribal lands.

To receive credit please follow the below instructions carefully. The credit does not start until after this form is returned to Norvado via email or mail.

- » Each line must be initialed
- » Sign and date at the bottom of the form

Return the form via:

EMAIL

billing@norvado.com

MAIL

Norvado
ATTN: Billing/ACP
PO Box 67
Cable, WI 54821

By signing this form, I give my affirmative consent that I want to participate in the Affordable Connectivity Program through Norvado and that I understand and certify that:

_____ The Affordable Connectivity Program is a government program that reduces the customer's broadband internet access service bill.

_____ I am either a current Lifeline customer or my eligibility has been verified by the National Verifier so that I qualify for the ACP.

_____ ACP provides a discount of up to \$30 per month depending on price of the service tier or bundle. If the total bill exceeds \$30 per month, I will be responsible for the remaining balance after the ACP discount is applied. This includes any taxes and required fees that are applied to the full amount of the service.

_____ The household may obtain ACP-supported broadband service from any participating provider of its choosing;

_____ I may only receive one ACP benefit per household, from one participating provider, and I certify that no other member of my household is receiving an emergency broadband benefit under the ACP.

_____ All official communications for ACP will be via electronic mail or text messaging and I consent to receive such communications from Norvado.

_____ I agree that all information I provide on this form may be collected, used, shared, and retained for the purposes of applying for and/or receiving the ACP benefit. I understand that if this information is not provided to the ACP Program Administrator, I will not be able to get ACP benefits.

_____ 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;

_____ The provider may disconnect the household's ACP-supported service after 90 consecutive days of non-payment;

_____ The household will be subject to the provider's undiscounted rates and general terms and conditions if the program ends, if the consumer transfers their benefit to another provider but continues to receive service from the current provider, or upon de-enrollment from the Affordable Connectivity Program; and

_____ The household may file a complaint against its provider via the Commission's Consumer Complaint Center.

_____ The household is not required to take a connected device from the provider in order to enroll in the program.

_____ PRINTED NAME

_____ CUSTOMER SIGNATURE

_____ DATE