VOIP 911 Service Acknowledgement

Customer Name: _____

Service Address (for 911 registration): _____

Phone Number(s): _____

Emergency Address Registration
I understand that my VoIP 911 calls will be routed based on the service address I provide and maintain with Farmers Independent Telephone Company.
Initials: _____

Address Updates
I agree to immediately update Farmers Independent Telephone Company if I move my VoIP service or change my service address.
Initials: _____

Service Limitations
I understand that VoIP 911 service may not be available during a power outage, broadband outage, or other service disruption, and I should maintain an alternative means of calling 911 (such as a mobile phone).
Initials: _____

Battery Backup
I understand that it is my responsibility to arrange for a battery backup or other power supply if I want my VoIP service to work during a power outage.
Initials: _____

Customer Responsibility
I acknowledge that it is my responsibility to provide accurate and up-to-date address information to Farmers Independent Telephone Company to ensure proper routing of emergency calls.
Initials: _____

Acknowledgment

By signing below, I confirm that I have received and reviewed this VoIP 911 Service Notice. I understand the limitations of VoIP 911 service and agree to the responsibilities outlined above.

Customer Signature: _____

Date: _____

Company Representative (if applicable): _____

Date: _____