

AT&T Connecticut: Lifeline

Now phone service is even more affordable.

Because phone service is so important in today's world, AT&T Connecticut believes everyone should have access to it. AT&T Connecticut offers two discounted telephone service plans: Regular Lifeline makes basic phone service even more affordable to qualified customers and Enhanced Lifeline offers a deeper discount to qualified AT&T Connecticut customers who live on current or former reservation or tribal land (as defined in Title 25 – Code of Federal Regulations, Section 20.1, Paragraph (v)).

Benefits	Regular Lifeline*	Enhanced Lifeline*
Discount on line connection (CTCAP)	\$30	Up to \$100
Monthly discount on basic service	Over \$9.00	Up to over \$19.00
Waiver of deposit for local service**	•	•
Optional toll restriction at no charge**	•	•
Optional blocking of 900/976 numbers	•	•
Additional lines allowed*	•	•
Optional services available like Caller ID, Call Waiting, etc.	•	•
Optional blocking of pay-per-like 3-Way Calling, etc.	•	•

* Lifeline plan benefits are only applicable on one phone line at the customer's principal place of residence. Enhanced Lifeline benefits are only available to customers living on tribal land.

** Customer may choose toll restriction instead of a deposit.

Terms and conditions are subject to change without notice. Some service restrictions may apply.

Call 1-800-288-2020 for more information.

Call 1-800-842-1514 for TTY service.

Es importante que usted entienda esta información. Si usted no lee el idioma inglés, por favor llame al 1-800-288-2020 para hablar directamente con un representante bilingüe, o pida información a una de las organizaciones mencionada en este folleto.



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Call today for more information:

1-800-288-2020

or fill out and mail the application to address below.

New Haven Wireline Support, AT&T Connecticut, 1st Floor, 1 Science Park, New Haven, CT 06511

For Spanish call 1-800-288-2020 . For TTY service call 1-800-842-1514.

To verify your identity and eligibility, please include in your envelope a photocopy of:

Identity: State Photo Identification Card OR Photo Identification Driver's License

Eligibility: Food Stamps Card, Medical Services Identification Card, Welfare Check or Eligibility Letter, Grant Letter from the State, or Letter from the Social Security Administration showing your participation.

Lifeline Authorization Form and Enhanced Lifeline Self-Certification Form

1. Sign me up for (choose either Regular Lifeline or Enhanced Lifeline):

Regular Lifeline

I hereby certify that I participate in the following programs (check all that apply):

Care for Kids Connecticut Energy Assistance Program CONNPACE Contingency Heating Assistance Program Federally Subsidized Housing--Section 8 Food Stamps Personal Care Assistance Refugee Program Rental Assistance State Administered General Assistance State Supplement to the Aged, Blind or Disabled Supplemental Security Income Temporary Family Assistance Title 19 Medicaid (including Husky and Healthy Start)

Enhanced Lifeline To the best of my knowledge, I live on tribal/reservation land (as defined in Title 25-Code of Federal Regulation, Section 20.1, paragraph V). I hereby certify that I participate in the following programs (check all that apply):

Care for Kids Connecticut Energy Assistance Program CONNPACE Contingency Heating Assistance Program Federally Subsidized Housing--Section 8 Food Stamps Personal Care Assistance Refugee Program Rental Assistance State Administered General Assistance State Supplement to the Aged, Blind or Disabled Supplemental Security Income Temporary Family Assistance Title 19 Medicaid (including Husky and Healthy Start) Temporary Family Assistance Bureau of Indian Affairs General Assistance Tribally Administered Temporary Assistance for Needy Families Head Start (income-qualified customers only) National School Lunch (free lunch program)

Name of Tribal Land or Reservation (required) _____

2. I also hereby certify that:

My telephone service is listed in my name. I am not listed as a dependent on another person's tax return.
 The address listed is my primary residence, not a second home or business.

3. If in the future I no longer participate in at least one of the programs listed in item 1 above, or conditions in item 2 above change, I will promptly notify AT&T Connecticut.

4. I authorize AT&T Connecticut or its duly appointed representative to access any records required to verify these statements to confirm my continued participation in the above program(s). I authorize representatives of the above programs to discuss with and/or provide copies to AT&T Connecticut, if requested by the company, to verify my participation in the above programs and my eligibility for Lifeline or Enhanced Lifeline.

5. I affirm, under penalty of perjury, that the foregoing representations are true.

Applicant's Name: _____

Applicant's Home Address: _____

City: _____ State: _____ Zip Code: _____

Applicant's Home Telephone Number: _____

(If you do not have a home telephone number, please call the toll-free number on this application to apply for service.)

Or Applicant can be reached at: (_____) _____

Applicant's Social Security Number: _____

Applicant's Signature: _____ Date: _____