

Subject: Lifeline Credit Application

Dear Long Lines Customer:

Please find enclosed an application and return envelope for Lifeline Telephone Assistance for the year 2012. Your application information needs to be updated on an annual basis. Please complete, sign, and return this application to our office as soon as possible. The name and address on your application must match the name and address on your Long Lines billing statement.

PLEASE NOTE, you only have to participate in one of the listed programs in order to be eligible for the credit. But, if you mark **YES**, to "Is your income at or below 135% of the Federal Poverty Guidelines?," you **MUST** provide documentation of proof for this. Any other program that you mark does not require documentation proof.

This information needs to be returned to Long Lines as soon as possible in order for you to continue participation in this credit program. Please inform Long Lines if this information changes or if you no longer participate in any of the qualifying programs. If you have any questions, please call our office at (712) 271-4000 or (866) 537-5900.

Sincerely,

Long Lines Customer Service 712-271-4000

lohc Lifeline Assistance Re-Certification Form

(Please Print or Type)

_First Name:		Mi	ddle Initial:
City:		_State:	ZIP:
City:		State:	ZIP:
(if existing se	rvice)		
receive messages:_			•··•
hrough any other te	lephone provide	er? Yes _	No
monthly telephone	service discount)	
tation Service (free	toll blocking of	r toll control))
ld currently partici	pates in one or r	nore of the fo	bllowing programs:
ram (SNAP, forme	rlv known as Fo		number of individuals in
	City: Yes City: ide your Tribal iden (if existing se receive messages: nrough any other te monthly telephone i tation Service (free ld currently partici Supplemental Assis ram (SNAP, forme	City:No YesNo City:(If you and ide your Tribal identification numb (if existing service) receive messages: nrough any other telephone provide monthly telephone service discount tation Service (free toll blocking on Id currently participates in one or r Supplemental Assistance) ram (SNAP, formerly known as For tion 8) Program (LIHEAP) es (TANF) Lunch Program	City: State:

income does not exceed 135% of the Federal Poverty Guidelines (see table below).

	and Human Services Poverty Guidelin		——————————————————————————————————————
Number in	135% Guideline (Annual)	Number in	135% Guideline (Annual)
Residence		Residence	
1	\$15,080	5	\$36,464
2	\$20,426	6	\$41,810
3	\$25,772	7	\$47,156
4	\$31,118	8	\$52,502

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For each additional person after 8, add \$5,346 to the annual guideline. Source: Federal Register, Vol. 77 No. 17, January 26, 2012, pp. 4034-4035

Important Information

Lifeline is a federal government assistance benefit and willfully making false statements to obtain the benefit can result in fines, imprisonment, de-enrollment, or being barred from the program.

Only one Lifeline service is available per household. A household is defined, for the purposes of the Lifeline program, as any individual or group of individuals who live together at the same address as one economic unit. An "economic unit" consists of all adult individuals contributing to and sharing in the income and expenses of a household. A household may include related and unrelated persons. A household is not permitted to receive Lifeline benefits from multiple providers. Violation of the one-per-household limitation constitutes a violation of the Federal Communications Commission's rules and will result in your de-enrollment from the program. Lifeline is a non-transferable benefit and you may not transfer your benefit to any other person.

I certify, under penalty of perjury, that:

(1) I meet the income-based or program-based eligibility criteria for receiving Lifeline, provided in 47 C.F.R. § 54.409;

(2) I will notify the carrier within 30 days if, for any reason, I no longer satisfy the criteria for receiving Lifeline including, as relevant, if I no longer meet the income-based or program-based criteria for receiving Lifeline support, I am receiving more than one Lifeline benefit, or another member of my household is receiving a Lifeline benefit;

(3) If I move to a new address, I will provide that new address to the telephone company within 30 days;

(4) If I provided a temporary residential address to the telephone company, I will meet requirement to verify my temporary residential address every 90 days;

(5) My household will receive only one Lifeline service and, to the best of my knowledge, my household is not already receiving a Lifeline service;

(6) The individual named on the documentation provided previously to demonstrate program-based eligibility, if not me, is part of my household.

(7) I acknowledge that I may be required to re-certify my continued eligibility for Lifeline at any time, and my failure to re-certify as to my continued eligibility will result in de-enrollment and the termination of my Lifeline benefits pursuant to 47 C.F.R. § 54.405(e)(4);

(8) I acknowledge that providing false or fraudulent information to receive Lifeline benefits is punishable by law; and

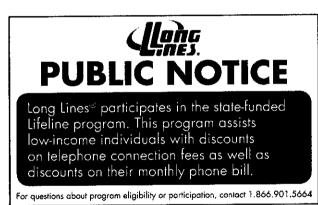
(9) The information contained in this Re-Certification Form is true and correct to the best of my knowledge.

Signature

Date

Return this completed Re-Certification form to Long Lines. Long Lines will contact you if any additional information is needed to prove your continued eligibility.

For more information about Lifeline, see www.PUC.SD.gov/Lifeline





LIFELINE ASSISTANCE APPLICATION

Please Print:		
Name:		
Last	First	M.I.
Address:		
Street	Apt. No.	
City:		
City	State	Zip Code
Social Security Number:	<u></u>	
Celephone Number (if existing service):		— Please include
Can be Reached Number (if new service)	n be Reached Number (<i>if new service</i>):	
☐ I participate in the Nation ☐ My household income is	Stamps program. ecurity Income (SSI). Iousing Assistance.	e lunch program.
(documentation required)		

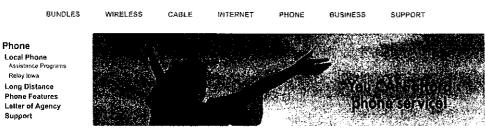
I agree to notify Long Lines when I no longer qualify based on the above criteria.

I CERTIFY UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE. I understand that I must meet at least one of the above qualifications to receive Lifeline assistance on my primary residential telephone line.

Signature

Date

Please mail completed forms to: Long Lines, PO Box 67, Sergeant Bluff, IA 51054 or drop off at any Long Lines Retail Store



Lifeline Program

Every person in America should have access to quality, affordable telecommunications service. This principle of "Universal Service has been the goal of the telecommunications industry for decades. In 1934, the federal government coolfied the goal and reaffirmed it in 1996 by establishing policies for the "preservation and advancement of Universal Service."

Yo achieve the Universal Service goal, carriers have access to a fund that is generated by contributions from the telecommunications providers in the United States. Telecommunications companies draw from the fund to provide four programs that support telecommunications services nationwide. Lifeline Assistance Program (Lifeline) is part of the fund's Low-Income Program and are described in detail below. Toll limitation service is another program available to low income subscribers to help them control what they spend on telephone service

Lifeline and Toll Limitation Service support provide discounts to eligible low-income consumers to help them establish and maintain telephone service

What type of discount is available?

Lifeline assistance

Lifeline assistance lowers the cost of basic monthly telephone service. Eligible consumers can receive up to \$10 per month in discounts. Additional state support may be available.

Eligible residents of Indian reservations or tribal lands can receive up to an additional \$25 in Lifeline support, but must pay at least \$1 for basic monthly service.

Toll Limitation Service (TLS)

TLS support allows eligible consumers who wish to avoid incurring large long distance fees to choose toll blocking or toll control at no cost.

How do I know whether I am eligible?

Eligibility for Lifeline and TLS support varies by state. Individuals who reside in states that have their own discount programs qualify for federal Lifeline and TLS support if they meet the eligibility criteria established by their state. In states that do not provide state support, an individual is eligible if he or she participates in one of the following programs:

- Low-Income Home Energy Assistance Program (LIHEAP)
- Federal Public Housing Assistance or Section 8
- Medicaid
- Food Stamps
- Supplemental Security Income (SSI)
- Temporary Assistance for Needy Families (TANF)
 National School Lunch free lunch program

In addition, a consumer may be eligible if his or her household income is at or below 135% of the federal poverty guidelines

2012 Estimated Income Requirements for a Household at or Below 135% of the Federal Poverty Guidelines

Family Size	48 Contiguous States & Washington, D.C.
1	\$15,080
2	\$20,426
3	\$25,426
4	\$31,118
5	\$36,404
6	\$41,810
7	\$47,156
8	\$52,502
For each additional person, add:	\$5,346

Residents of Indian reservations or tribal lands qualify if they participate in any of the programs listed above, have a household income that is at or below 135% of the federal poverty guidelines, or participate in one of these programs

Bureau of Indian Affairs (BIA) general assistance

Head Start (income eligible)

Tribal TANF

How do I apply to receive Lifeline and TLS support discounts?

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Contact Long Lines at 712.271.4000. Consumers must apply for Lifeline and TLS discounts through their local phone company. The Universal Service Administrative Company's (USAC) website contains state specific Lifeline contact information for many companies at www.lifelinesupport.org. You may call USAC toll free at 1-888-641-8722 with any questions about Lifeline and TLS discounts.

Download Application

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