# **BI** Burlington Telecom

# Internet Assistance Program

# About The Program

### **Program Details**

BT created this Internet Assistance Program to bring more affordable fiber internet to customers inside and outside of Burlington. The program offers the following for qualified applicants:

- Basic
  - 50MB/50MB \$9.95 with Smart WiFi and Free Installation Included
- Enhanced
  - 150MB/150MB \$24.95 with Smart WiFi and Free Installation Included.

### Eligibility

- Qualify (and provide documentation dated within the past 60 days for one of the following programs)
  - a. Medicaid: Most recent eligibility letter for any member of your household.
  - b. Public Housing Assistance: documentation such as your lease, housing assistance payment (HAP) contract, or eligibility documentation from HUD.
  - c.SNAP letter indicating you are approved for Supplemental Nutrition Assistance Program benefits.
  - d. TANF: eligibility letter for Temporary Assistance for Needy Families.
  - e.SSI: eligibility letter for Supplemental Security Income.
  - f. NSLP/Head Start: copy of a letter indicating current participation in the National School Lunch Program or Head Start, with your child's name, the school's name, and the address of where you are requesting service.
  - g.LIHEAP: a letter confirming eligibility for the Low-Income Home Energy Assistance Program.
  - h.WIC: eligibility letter for the Women, Infants and Children Program.
  - i.FEDERAL PELL GRANT: documentation from your institution's financial aid office.
  - j. VA PENSION: veterans pension eligibility determination letter from the Veterans Administration.
  - k. Tribal assistance: eligibility letter, including TTANF, FDPIR, etc.
- Except when qualifying through a child or dependent in the household, the program applicant's name must match the Burlington Telecom account holder's name.
- Live in an area where Burlington Telecom Internet service is available.
- Have no outstanding debt with Burlington Telecom.
- Free Installation is limited to a single outlet. Additional charges apply if multiple outlets are requested.

Note: Can not be combined with any other discounted program and/or service offered.

### Burlington Telecom

W:www.burlingtontelecom.com

- A: 62 Pearl Street, Essex Junction, VT N 200 Church Street, Burlington VT
- P: 802-540-0007 E: customerservice@burlingtontelecom.com

## Burlington Telecom

# **Internet Assistance Program Application**

DATE OF APPLICATION



### PERSONAL INFORMATION

Full Name :				
Date of Birth :				
Phone :				
Email :				
Best Way to Reach You: Email Phone				

Check if you are qualifying through a child or dependent in your household. If so, answer the following questions:

### THEIR PERSONAL INFORMATION

Their Full Name :	
Their Date of Birth :	
Phone :	
Email :	



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# Internet Assistance Program Application

### ADDRESS

Street Address:					
Apt, Unit, etc.	City:				
State:	Zip Code:				
Is This a Temporary Address?	Yes No				
I Agree That All the Above Information Is Complete and Accurate:					
	Applicant Signature				
	Applicant Name (Print)				



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# Burlington Telecom

I (or my dependent or another person in my household) currently get benefits from the government program(s) listed on this form. **Initial** \_\_\_\_\_

I agree that all the information I provide on this form may be collected, used, shared, and retained for the purposes of applying for BT's Internet Assistance Program. I understand that if this information is not provided to Burlington Telecom, I will not be able to get BT's Internet Assistance Program. **Initial** \_\_\_\_\_

Burlington Telecom will check my eligibility status yearly. When it is time for me to recertify (renew) my benefit, I understand that I have to respond by the deadline or I will be removed from BT's Internet Assistance Program and my Internet service will be disconnected. I understand that IAP can not be combined with any other subsidized program. Should my benefit be stopped for this reason, my account services will be moved to Burlington Telecom's lowest service offering at the advertised rate. **Initial** 

All the answers and agreements that I provided on this form are true and correct to the best of my knowledge. **Initial** \_\_\_\_\_

Applicant Signature

Applicant Name (Print)

### THANK YOU FOR APPLYING

Please send PDF via e-mail or drop off printed application along with proof of eligibility to one of our offices.



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