



Answering Your Call.

CUSTOMER BILLING INFORMATION Referred By: _____ Date: _____

Company Name: _____

Contact Name: _____ Date: _____

Address: _____

Phone: _____

Email: _____

Installation Address / 911 Address, if different than above:

Amex MasterCard Visa Discover Bill Me (with approved credit)

Credit Card #: _____ Expiration: _____

(all customers are required to keep a Valid Credit Card # on file for credit purposes.)

Credit Card Auto Payment: YES / NO

All BlueTalk Plans are 12 month agreements. There is a \$29.95 setup fee on all accounts.

BlueTalk BUSINESS

Unlimited	2 nd Line - Unlimited	1000 Minutes	500 Minutes
\$44.00 p/m _____ bundle package - \$39.95 _____ (doesn't include Internet Pricing)	\$35.95 p/m _____	\$35.95 p/m _____	\$23.95 p/m _____

BlueTalk RESIDENTIAL

Unlimited	2 nd Line - Unlimited	1000 Minutes	500 Minutes
\$39.95 p/m _____ bundle package - \$35.95 _____ (doesn't include Internet Pricing)	\$35.95 p/m _____	\$27.95 p/m _____	\$18.95 p/m _____

Assigned VoIP # (_____) _____ - _____ Use this number as a FAX line? YES / NO

Second VoIP # (_____) _____ - _____ Use this number as a FAX line? YES / NO

VoIP 800 Service [\$.03 p/Min.]: YES / NO (_____) _____ - _____

Virtual Numbers - \$4.95 per month – Quantity: _____

Virtual Number Request – Area code (_____) – Exchange (_____)

Virtual Number Request – Area code (_____) – Exchange (_____)

Number Porting - \$15 per number (one time charge)

(____) _____ - _____
(____) _____ - _____

Analog Terminal Adapter (ATA) - \$99.00 _____ – Serial # _____
(Equipment has 12 month limited warranty)

TERMS AND CONDITIONS

Payment of Bill: Your payment must be received by the "Payment Due Date" in order to be reflected on your next invoice. If the Company does not receive payment for the charges on this statement by the "Payment Due Date", your account will become past due and subject to a late payment charge. Nonpayment of regulated services, by or before the "Payment Due Date", may result in disconnection of your telephone service.

Late Payment Charge: The "Late Payment Charge" rate is 1.5% or the highest fee allowed per applicable state law per month and is applied to any outstanding balance from the previous month's bill. This balance is included in the "Summary Of Current Charges" under the title "Late Fee" on page 3 and is included in the "Past Due Balance" on page 1.

Reconnection Charge: In the event that it becomes necessary to disconnect a customer from any Local or Long Distance Plan or Plans for any reason whatsoever, there will be a charge per billing telephone number required for reconnection. A customer will not be reconnected until all outstanding balances have been paid in full.

Returned Check Charge: Checks submitted to the Company for payment of services which are returned from the customer's bank unpaid will result in a charge equal to the highest fee allowed per applicable state law.

Billing Inquiries: If you have any questions regarding your bill, please call Customer Care at 888-544-7544, or send your comments in writing to: *Professional NeTworks, Inc*, Billing Inquiries, 974 East Stuart Drive, Suite H, Galax VA 24333.

Please include your name, account number, a detailed explanation of your question or comment and the dollar amount of the item(s) in question.

Billing Disputes: Questions or disputes regarding any of the charges associated with this bill must be raised by calling the number on the front page of your bill within 30 calendar days of the Billing Date.

Universal Service Fund Fee: Universal Service Fund Fee does not apply at this time to broadband digital phone service.

Phone Number Listing: By default your VoIP phone number will not displayed in any local or regional printed directory listing either in the white pages or yellow pages. Customers are responsible for notifying their local directory listing service to include their VoIP number in their directory listing service.

Termination Requirement: It is required by all *BlueTalk* customers to return the ATA to our returns department: 974 East Stuart Drive, Galax, VA 24333 with 30 days of termination. You will receive a \$30 return credit after returning the ATA in working condition.

Other Terms and Conditions apply to this invoice and are available at <http://www.BlueTalkvoip.com/terms.aspx>. By continuing to use this service you are agreeing to abide by these Terms and Conditions.

*****NOTICE TO CUSTOMERS*****

Thank you for purchasing your *BlueTalk* Voice Over Internet Protocol (“VoIP”) service provided by PROFESSIONAL NETWORKS, INC. (“Company”). By activating the VoIP service, you acknowledge that you have read and understood, and you agree, to the following terms and to those located at www.BlueTalkVoip.com.

Please read carefully the following terms. **IF YOU DO NOT AGREE TO ALL OF THE AFOREMENTIONED TERMS AND CONDITIONS, DO NOT USE THE SERVICES, AND CANCEL THE SERVICES IMMEDIATELY BY CALLING THE COMPANY AT (888)- 544-7544**

No Local Service; 911/E911 Service

YOU ACKNOWLEDGE THAT THIS SERVICE IS NOT OFFERED AS A PRIMARY LINE OR LIFELINE SERVICE, BUT AS A LONG DISTANCE SERVICE. YOU SHOULD ALWAYS HAVE AN ALTERNATIVE MEANS OF ACCESSING TRADITIONAL E911 SERVICES. You understand

that in order to have access to 911/E911 services you will have to maintain your local phone service. You acknowledge and understand that the Service does NOT function or connect the same way as traditional copper, fiber or wireline local phone service and is intended for domestically originated long distance service only. You agree to inform any household residents, guests and other third persons who may be present at the physical location where you use the Service as to the non-availability of 911 or E911 dialing from your Service and Device(s), including without limitation the conspicuous posting on the device of any caution or warning materials as may be appropriate, and you agree to make reasonable efforts and use reasonable judgment in informing them of the proper and specific operation and requirements of the Service, if available, and/or to restrict third parties' access to the Service for any purpose.

All non-voice communications equipment, including but not limited to, home security systems that are set up to make automatic phone calls, fax machines, modems and medical monitoring devices, are not compatible with the Service. By accepting this Agreement, you waive any claim against Agent and its underlying provider for interference with or disruption of such systems due to the Services

Service Outage

Power Outage: You acknowledge and understand that the Service as a whole, does not function in the event of a power failure. Should there be an interruption in the power supply, the Service will not function until power is restored. A power failure or disruption may require the Customer to reset or reconfigure equipment, connections or logins, prior to utilizing the Service.

Broadband Service Outage: You acknowledge and understand that service outages or interruptions by your broadband provider will prevent ALL Service. Even a brief interruption in your broadband internet connection may cause the Service and 911 calling to fail until Customer resets or reconfigures equipment, connections or logins.

Other Service Outages: You acknowledge and understand that if there is a service outage for ANY reason, such outage will prevent ALL Service, including 911 dialing. Such outages may occur for a variety of reasons, including, but not limited to, those reasons described elsewhere in this Agreement.

Limitation of Liability and Indemnification

You acknowledge and understand that the Company's liability is limited for any Service outage and/or inability to dial 911 from your line or to access emergency service personnel, as set forth in this document, and applicable Tariffs. **YOU AGREE TO DEFEND, INDEMNIFY, AND HOLD HARMLESS THE COMPANY, ITS OFFICERS, DIRECTORS, EMPLOYEES, AFFILIATES AND AGENTS AND ANY OTHER SERVICE PROVIDER WHO FURNISHES SERVICES TO YOU IN CONNECTION WITH THE SERVICE, FROM ANY AND ALL CLAIMS, LOSSES, DAMAGES, FINES, PENALTIES, COSTS AND EXPENSES (INCLUDING, WITHOUT LIMITATION, REASONABLE ATTORNEY FEES) BY, OR ON BEHALF OF, YOU OR ANY THIRD PARTY OR USER OF THE SERVICE RELATING TO THE FAILURE OR OUTAGE OF THE SERVICE, INCLUDING THOSE RELATED TO 911 DIALING OR OTHER EMERGENCY DIALING.**

Customer Signature: _____ Date: _____

Customer Printed Name: _____