



Mississippi Public Service Commission Lifeline Assistance Form

Name of Service Provider: _____

First Name: _____ MI: _____ Last Name: _____

Last 4 digits of Social Security Number: _____ Tribal ID #: _____ Date of Birth: _____

Residential Physical Address: _____ City: _____
(No P.O. Box)

State: MS Zip Code: _____ This address is: Permanent Temporary Multi-Household

Billing Address: _____ City: _____
(May be P.O. Box)

State: MS Zip Code: _____ Telephone Number: _____

NOTICE

Lifeline is a federal benefit; only one Lifeline service is available per household; a household cannot receive benefits from multiple providers such as wireline, wireless or broadband services; a household is defined for Lifeline eligibility as any individual or group of individuals who live together at the same address and share their income and expenses (economic unit); and Lifeline is a non-transferable benefit. Violation of the one per household rule requirement would constitute a violation of the Federal Communications Commission's rules and would result in the consumer's de-enrollment from the program, and potentially, prosecution by the United States government.

Service Type: Fixed Voice Mobile Voice Fixed Broadband Mobile Broadband Voice/Broadband Bundle

Are you or any member of your household currently receiving a Lifeline benefit from any service provider? No Yes
If yes, only one Lifeline discount is allowed per household.

Program-Based Eligibility

_____ (initials required) I certify that either my household or I participate in the following program(s). I will provide documentation of my participation in programs selected to the service provider. (Check all that apply)

- Supplemental Nutrition Assistance Program (SNAP) Medicaid
- Supplemental Security Income (SSI) Veterans and Survivors Pension Benefit
- Federal Public Housing Assistance (Section 8)

Tribal Programs

- Bureau of Indian Affairs General Assistance Tribal Temporary Assistance for Needy Families (TTANF)
- Head Start (income qualifying mechanism only – tribal) Food Distribution Program on Indian Reservations

Income-Based Eligibility

TO QUALIFY FOR INCOME ELIGIBILITY, YOU MUST PROVIDE COPIES OF ONE OR MORE OF THE DOCUMENTS LISTED BELOW:

Prior year's state, federal or Tribal tax return, Social Security benefits statement; Veterans Administration benefits statement; federal or Tribal notice letter of participation in Bureau of Indian Affairs General Assistance; Retirement/Pension benefit statement; divorce decree or child support document; Unemployment/Workers Compensation benefits statement; or current income statement from employer or paycheck stub or other official document containing income information. If you provide documentation that does not cover a full year (such as current pay stub), you must submit three (3) consecutive months of the same type of document within the current calendar year.

How many people are in your household? _____

What is the monthly/yearly total household income? _____ per Month Year

My total household income is at or below 135% of the Federal Poverty Guidelines. (See Federal Poverty Guidelines on Page 3)

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I certify under penalty of perjury the following (*initial by each certification*)

- _____ *I meet the income-based or program-based eligibility criteria for receiving Lifeline.*
- _____ *I will notify the service provider within 30 days if I (1) cease to participate in a federal qualifying program or programs or if my annual household income exceeds 135% of the Federal Poverty Guidelines; (2) receive more than one Lifeline-supported service; or (3) for any other reason, no longer satisfy the criteria for receiving Lifeline support. I certify attest under penalty of perjury that I understand this notification requirement and I may be subject to penalties if I fail to follow this requirement;*
- _____ *If you are seeking to qualify for Tribal benefits, I certify that I live on Tribal Lands.*
- _____ *If I move to a new address, I will provide that new address to the service provider within 30 days of moving.*
- _____ *If my address is temporary, I will verify my address with the service provider every 90 days.*
- _____ *My household will receive only one Lifeline service and, to the best of my knowledge, my household is not already receiving a Lifeline benefit from any other service provider such as Safelink, Assurance, Access Wireless, or wireline provider.*
- _____ *The information I provided in this certification form is true and correct to the best of my knowledge.*
- _____ *I understand that willfully making false statements to obtain the benefit can result in fines, imprisonment, de-enrollment or being barred from the program.*
- _____ *I acknowledge that providing false or fraudulent information to receive Lifeline benefits is punishable by law.*
- _____ *I acknowledge that I may be required to re-certify my continued eligibility for Lifeline at any time, and my failure to re-certify my continued eligibility will result in de-enrollment and termination of my Lifeline benefit.*

Signature of Applicant

Date

Please mail or fax this application to your telephone service provider. The service provider will also require you to submit proof of participation in program(s) indicated, or appropriate documentation of income if qualification is based upon income being at or below 135% of Federal Poverty Guidelines. Please refer to Page 3 of this application for fax numbers for designated eligible telecommunications providers in Mississippi and the Federal Poverty Guidelines.

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Mississippi Lifeline Telephone Service Providers					
Company	Address	City	State	Zip	Fax
Access Wireless by iWireless	420 Progress Drive	Mattoon	IL	61938	973-599-6573
Assurance Wireless by Virgin Mobile	P.O. Box 686	Parsippany	NJ	7054	877-732-3018
AT&T	P O Box 5020	Charleston	IL	61920	800-295-7495
AT&T Wireless	1215 W. Cherry Street	Vermillion	SD	57069	800-517-1741
Bay Springs Telephone Company	P.O. Box 409	Bay Springs	MS	39422	601-764-2051
Bruce Telephone Company, Inc.	P.O. Box 489	Bruce	MS	38915	662-983-7300
Calhoun City Telephone Company, Inc.	TDS Telecom, P.O. Box 608	Lancaster	WI	53813	877-271-2861
Cellular South Licenses, Inc.	P.O. Box 159	Meadville	MS	39653	601-384-3836
CenturyTel	P.O. Box 4918	Monroe	LA	71211	866-810-7530
Decatur Telephone Company	P.O. Box 146	Decatur	MS	39327	601-635-3100
Delta Telephone Company	P.O. Box 217	Louise	MS	39097	662-836-5770
Dixie-Net Communications, Inc.	301 N. Main Street	Ripley	MS	38663	662-993-2453
enTouch Wireless by Boomerang	P.O. Box 37	Hiawatha	IA	52233	866-488-8719
Feel Safe Wireless by Airvoice	Attn: Lifeline, 2425 Franklin Road	Bloomfield Hills	MI	48302	877-247-7799
Franklin Telephone Company	P.O. Box 446	Bude	MS	39630	601-384-5500
Frontier Communications of MS, Inc.	1398 S. Woodland Blvd.	DeLand	FL	32720	386-736-2632
Fulton Telephone Company	402 W. Beene St	Fulton	MS	38843	662-862-7900
Georgetown Telephone Company, Inc.	P.O. Box 137	Georgetown	MS	39078	601-858-2233
Global Connection Inc. of America	P.O. Box 48269	Atlanta	GA	30362	888-878-9323
Lakeside Telephone Company	P.O. Box 68	Sunflower	MS	38778	662-569-3200
Life Wireless by Telrite	11100 Alcovy Rd	Covington	GA	30014	866-770-6110
Micro-Comm, Inc	2612 Cameron St	Mobile	AL	36607	251-473-3522
Mound Bayou Telephone Company	101 E. Main St.	Mound Bayou	MS	38762	662-741-3096
Myrtle Telephone Company, Inc.	TDS Telecom, P.O. Box 608	Lancaster	WI	53813	877-271-2861
Noxapater Telephone Company	P.O. Box 727	Bay Springs	MS	39422	601-764-6529
Safelink Wireless by Tracfone	Safelink Wireless PO Box 220009	Milwaukie	OR	97269-0009	866-902-5756
Sledge Telephone Company	P.O. Box 68	Sunflower	MS	38778	662-569-3200
Smithville Telephone Company	P.O. Box 117	Smithville	MS	38870	662-651-4711
Southeast MS Telephone Company, Inc.	TDS Telecom, P.O. Box 608	Lancaster	WI	53813	877-271-2861
T-Mobile	P.O. Box 37380	Albuquerque	NM	87176	800-937-8997
TEC of Jackson, Inc.	700 South West Street	Jackson	MS	39201	888-424-4329
Telepak Networks, Inc.	P.O. Box 429	Meadville	MS	39653	601-384-8420
Windstream Mississippi, Inc.	1720 Galleria Blvd.	Charlotte	NC	28270	704-814-7020

135% OF THE 2017 FEDERAL POVERTY GUIDELINES			
Persons in Family or Household	Yearly Household Income	Monthly Household Income	Weekly Household Income
1	\$16,281	\$1,357	\$313
2	\$21,924	\$1,827	\$422
3	\$27,567	\$2,297	\$530
4	\$33,210	\$2,768	\$639
5	\$38,853	\$3,238	\$747
6	\$44,496	\$3,708	\$856
7	\$50,139	\$4,178	\$964
8	\$55,782	\$4,649	\$1,073
For each additional person, add	\$5,643	\$470	\$109