



APPLICATION FOR DROP POLE ATTACHMENT LICENSE

Name of Applicant / Licensee

Application Date

Applicant Contact Person

D.P. Application Number

Address

TDS Telecom Operating Company

City, State, ZIP

Contact Telephone Number

In accordance with the terms and conditions of the License Agreement between TDS Telecom and _____ (Licensee), dated _____, 20__, application is hereby made for a non-exclusive license to attach communications facilities to _____ (quantity) poles as indicated on the Drop Pole Application Listing on Page 2 of this Application Form.

By: _____
Authorized Licensee Signature Date Billing Address (See Note 1)

Printed Name Title City, State, Zip

Application Fee Received By Amount Date Date Written 3rd Party Confirmation Received

- (1) All applications are to be accompanied with pre-payment of Application Fees as specified in Schedule II of License Agreement. At the option of TDS Telecom, Licensees with pre-approved credit may request billing for Attachment Fees by providing billing information in the appropriate fields on this form.
(2) The Drop Pole Attachment Application Number applies to each individual application. Each License Application will be numbered in sequential ascending order by License for each License Agreement. Applications will be processed in sequential ascending order according to application numbers assigned by the Licensee unless Licensee designates application is to have priority over other pending applications
(3) Applications for Drop Pole Attachment License are to be submitted monthly.
(4) Copies of this form are to be sent to CSC for billing of Application Fees.



APPLICATION FOR DROP POLE ATTACHMENT LICENSE

DROP POLE APPLICATION LISTING (1)

Licensee Name

D.P. Drop Pole Attachment Application No.

Table with 5 columns: Item No., Qty. Drop Pole (2), Location (3), Attachments (4), Remarks. The table contains 13 empty rows for data entry.

TDS Telecom License Number (5) : Date Granted:

Notes:

- (1) This form is to accompany each Application for Drop Pole Attachment License.
(2) Indicate quantity of TDS TELCCOM poles on which Licensee has attached customer drop loops at location described in box (3).
(3) Address of pole or general location such as County Rd.158.
(4) List Licensee facilities to be attached to pole. If Licensee has existing facilities on pole for which attachment fees are being paid then it is not necessary to indicate pole on this application.
(5) License Number to be provided by TDS Telecom upon final authorization to attach.