



BUSINESS APPLICATION

Toll-free: (888) 586-3100
Local: (218) 444-1234 / (218) 999-1234

Cust# 51158 Agreement #: 700-999-1872 Contact #: 218-326-7618 Install Date: Time:
Name: CITY OF GRAND RAPIDS Contact Type: Business Current Date: 05/21/26
Billing Address: 420 N POKEGAMA AVE 911 Address: 3708 GOLF COURSE RD

City: GRAND RAPIDS State: MN Zip: 55744

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BROADBAND

SMALL BUSINESS

- | | Package Price |
|--|-----------------|
| <input checked="" type="checkbox"/> 250 Mb* GZSB | \$ 60.00 / mo. |
| <input type="checkbox"/> 1 Gb (1000 Mb)* GZSB | \$ 80.00 / mo. |
| <input type="checkbox"/> 2 Gb (2000 Mb)* GZSB | \$ 150.00 / mo. |
| <input type="checkbox"/> 6 Gb (6000 Mb)* GZSB | \$ 300.00 / mo. |

CURRENT METRO CUSTOMER

Static IP Assignment

None Single +\$10/mo

e-mail Username:

_____@paulbunyan.net
(5-15 lowercase letters or numbers - MUST begin with a letter)

Password:

(> 5 characters - MUST be different than username)

VOICE

Agreement #: _____

PHONE \$ 20.00 / line

GZ Long Distance

VOICE MAIL: -SELECT- Y / N # RINGS: _____

* Internet speeds and wireless coverage may be limited to the network devices you have installed in your home and may require hardware upgrades for the best performance.
- NOT FOR RESALE -

MANAGED WIFI

- GZ SmartBiz Service** \$ 30.00 / mo.
(includes SmartBiz features and 1 AP)
- Additional APs _____ x \$10.00 = _____ /mo.
- Managed WiFi**
- Calix APs _____ x \$10.00 = _____ /mo.
Calix Outdoor WiFi AP _____ x \$15.00 = _____ /mo.
Calix Bus WiFi Outdoor Pro _____ x \$25.00 = _____ /mo.
Ubiquiti APs _____ x \$10.00 = _____ /mo.
Ubiquiti Gateway _____ x \$10.00 = _____ /mo.
- Managed WiFi Monthly Total _____ /mo.

Install Fees

- Installation Fee for Service and 1 AP - \$100 \$ 0.00
 Waived with 6 month service agreement
- Additional AP's _____ x \$40.00 = \$ _____
(Does Not Include Wiring)

Email Username for SmartBiz App: _____

Password: _____

SSID Primary Network: _____

Password: _____

NOTES: INSTALL GZ 250 SM BUS WITH STATIC IP @ 3708 GOLF COURSE RD

* All prices subject to change. There are no substitutions allowed on any package. Some restrictions apply.

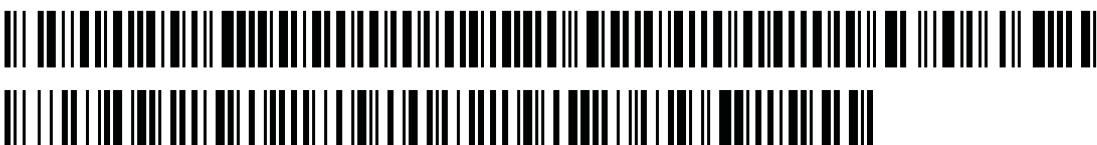
- I understand that the listed package price does not include taxes and other mandated charges, which will increase my bill. My first bill may be 1.5-2 times larger than the regular monthly bill due to the billing cycle.
- I understand that when I have the service installed that I must pay for a minimum of one month's service regardless of whether I choose to discontinue the service within a month of having the service installed.
- As a consumer of Paul Bunyan Communications, you agree that the equipment installed on your premise is for use at the location as indicated on the application. You agree to take reasonable care of the equipment and agree to not open the equipment, take it apart, or alter it in any way. You are responsible for all damage to the equipment, beyond reasonable wear from normal use.
- Your use of the equipment and services you receive are subject to the various policies of Paul Bunyan Communications. Such policies and practices are subject to change. Monthly fees for use of the equipment and services are billed in advance.
- If services are discontinued, all equipment must be returned to Paul Bunyan Communications in working condition. If equipment is not returned, you understand and agree that the costs of the equipment including power cords and any other equipment that is provided to you for you to receive the service, will be assessed and will be your responsibility.
- I agree that any transactions or agreements with Paul Bunyan Rural Telephone Cooperative dba Paul Bunyan Communications or its associated companies may be formed by electronic means.
- AGREEMENT TO BE BOUND: By applying for services from Paul Bunyan Communications, you acknowledge that you have read and agree to be bound by all acceptable use policies and terms and conditions of service, as they may be amended.
- I agree that I will be responsible for all damages or loss and the equipment will be returned immediately upon termination of this service or at any time upon the request of Paul Bunyan Communications.
- I have read and fully understand the above information. I agree that Paul Bunyan Communications shall not be liable for any loss, damage or expense of any kind.

Signature: _____

Date: _____

App Taken by: CVH

SCHEDULED BY (Initials): _____



DISREGARD THIS PAGE

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.					
	2 Business name/disregarded entity name, if different from above					
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):			
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC	<input type="checkbox"/> C Corporation	<input type="checkbox"/> S Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust/estate	Exempt payee code (if any) _____
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____					
	Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.					
	<input type="checkbox"/> Other (see instructions) ▶ _____					Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions.			Requester's name and address (optional)			
6 City, state, and ZIP code						
7 List account number(s) here (optional)						

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number											
				-			-				
or											
Employer identification number											
				-							

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
 - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 - Form 1099-S (proceeds from real estate transactions)
 - Form 1099-K (merchant card and third party network transactions)
 - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*



Toll-free: (888) 586-3100

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Consumer Broadband Label

Broadband Facts	
Paul Bunyan Communications	
250 Mbps Residential/Small Business Broadband Service	
Fixed Broadband Consumer Disclosure	
Monthly Price	\$60.00
Introductory Rate	No
Contract Required	No
Additional Charges & Terms	
Provider Monthly Fees	
Late fee may be assessed if bill is past due in the amount of \$5.00 or 1.5% (whichever is greater)	\$5.00
One-Time Fees at the Time of Purchase	
Installation Fee - can be waived with a qualifying contract	\$100.00
Government Taxes	\$0.00
Promotional Pricing	
If promotional pricing applies, see monthly price above.	
Speeds Provided with Plan	
Typical Download Speed	up to 250 Mbps
Typical Upload Speed	up to 250 Mbps
Latency	3 ms
Data Caps	Unlimited
Network Management	
https://paulbunyan.net/network-management-policies/	
Privacy	
https://paulbunyan.net/data-privacy-policy/	
Customer Support	
Phone:	888-586-3100
Email:	customerservice@paulbunyan.net
Website:	www.paulbunyan.net
Address:	1831 Anne St NW; Bemidji, MN 56601
Learn more about the terms used on this label by visiting the Federal Communications Commission's Consumer Resource Center.	
	fcc.gov/consumer
Unique Plan Identifier:	F00026449532024250MBPSPBCX

Must be signed by landowner

Toll-free: (888) 586-3100

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 Temp Drop Spring Construction

05/21/26 51158		Applications Completed? <input type="text" value="Yes"/> If so, Install Date: _____	
DATE:	CUSTOMER # >		
CITY OF GRAND RAPIDS	700-999-1872	New Construction? <input type="text" value="No"/>	
BUSINESS NAME	PBC Phone Number	Expected Move -In Date: _____	
City of Grand Rapids	Tasha Connelly	Mayor	
OWNER NAME	AUTHORIZED REPRESENTATIVE	TITLE	
3708 GOLF COURSE RD	GRAND RAPIDS	MN	55744
PHYSICAL ADDRESS	CITY	STATE	ZIP
218-326-7618	CHT 8	Order Taken By: CVH	
CONTACT NUMBER	CONTACT TYPE	SITE	

UTILITIES:

<input checked="" type="checkbox"/> Electric	<input type="checkbox"/> Electric Line to Lake Pump	<input checked="" type="checkbox"/> Propane Line	<input type="checkbox"/> Invisible Dog Fence
<input type="checkbox"/> Electric Line to Water Well	<input type="checkbox"/> Lift Station Pump Line	<input type="checkbox"/> Satellite Dish	<input type="checkbox"/> Sprinkler System
<input type="checkbox"/> Customer-Owned Electric Lines Beyond the Meter	<input checked="" type="checkbox"/> Metallic Well/Water Lines		

LOCATION DESCRIPTION AND OTHER UTILITIES:

The Undersigned hereby grants to the Paul Bunyan Rural Telephone Cooperative permission to construct, operate and maintain a communication line or system on, over, or under the above premises and in or upon all streets, roads, or highways abutting said land. The Undersigned further agrees that in the event that said undersigned does not own all private land or lands necessary to be crossed, as stated above, he or she or they shall obtain all necessary permission from the owner or owners of said land or lands, and shall submit same to said Cooperative prior to installation of service. The Undersigned hereby grants to the Cooperative access to the premises of Undersigned at all reasonable times for its purpose of installing, repairing, maintaining or removing any service to the premises. Application for services still required. The first 1320' (1/4 mile) of a service line is plowed at no cost to the customer. Any additional footage beyond 1320' will be charged to the customer at rate of \$4.00/foot construction cost. Pricing is subject to change and will be billed at the current rate at time of construction.

INITIAL

The undersigned(s) understand and agree that Paul Bunyan Communications and/or agent will locate my private utilities in good faith and to the best of their ability. However, if any utility is mislocated, the undersigned agrees that he/she/it will protect, defend, indemnify and keep Paul Bunyan Communications and its members, employees, and agents, forever harmless and indemnified against and from any penalty or damage or charges imposed for any violation of any laws or ordinances, arising from burying cable and/or location of infrastructure on or under the undersigned's premises and the undersigned will, at all times, protect, defend, indemnify and save Paul Bunyan Communications and keep it harmless against and from any and all loss, cost, damage or expense arising out of or from any loss of life, injury, property damage or other occurrence causing injury to any person or property whomsoever or whatsoever as a result thereof.

The undersigned releases Paul Bunyan Communications and its members, employees, and agents from any and all actions, claims, or demands that I/we, my/our assignees and/or legal representatives now have, or may have in the future, for injury, death, or property damage, related to the burying of cable and/or location of infrastructure on or under the undersigned's premises.

I/we have carefully read this release and waiver of liability and fully understand its contents. I/we am/are aware that this is a total release of liability for the benefit of Paul Bunyan Communications and hereby sign this document of my/our own free will.

Name (please print): _____

Signature: _____

IF YOU HAVE ANY QUESTIONS REGARDING THE DROP PROCESS OR SERVICES AVAILABLE AT YOUR LOCATION PLEASE CALL OUR ENGINEERING DEPARTMENT @ (218) 444-1170

I agree that any transactions or agreements with Paul Bunyan Rural Telephone Cooperative dba Paul Bunyan Communications or its associated companies may be formed by electronic means.

