

Instrucciones para someter los documentos para Aplicación y Planilla del Hogar, para el Programa Lifeline de Optico Fiber.

- 1. Favor llenar los documentos en letra de molde, de forma legible.
- 2. Acompañe los documentos con la siguiente evidencia:
  - Identificación vigente y con fotografia.
  - Factura Reciente de servicio de agua, luz o cable tv a su nombre.
  - Carta de beneficio gubernamental y/o evidencia actualizada.
- 3. Envie los mismos por correo electrónico a: lifeline@criticalhub.com o por fax al 787-957-6011

Instructions to submit the documents for Application and Home Worksheet, for the Optico Fiber Lifeline Program

- 1. Please fill the forms on clear print writing.
- 2. Submit the following documents with your forms:
  - Valid and photo ID.
  - Recent bill for Water, Electricity or Cable TV service in your name.
  - Government benefit letter and / or updated evidence.
- 3. Email the documents to: lifeline@criticalhub.com or fax them to: 787-957-6011

## Lifeline Program Household Worksheet





## About Lifeline

Lifeline is a benefit that lowers the monthly cost of phone or internet service (not both). You are only allowed to get one Lifeline benefit per household, not per person.

## What this worksheet is for

Use this worksheet if someone else at your address gets Lifeline. The answers to these questions will help you find out if there is more than one household at your address.

### What is a household?

A household is a group of people who live together and share income and expenses (even if they are not related to each other).

#### **Examples of one household:**

- A married couple who live together are one household. They must share one Lifeline benefit.
- A parent/guardian and child who live together are one household. They must share one Lifeline benefit.
- An adult who lives with friends or family who financially support him/her are one household. They must share one Lifeline benefit.

#### **Examples of more than one household:**

- 4 roommates who live together but do not share money are 4 households. They can have one Lifeline benefit each, 4 total.
- 30 seniors who live in an assisted-living home are 30 households. They can have one Lifeline benefit each, 30 total.

## Household expenses

A household shares expenses. Household expenses include, but are not limited to, food, healthcare expenses, and the cost of renting or paying a mortgage on your place of residence and utilities.

### Income

Households share income. Income includes salary, public assistance benefits, social security payments, pensions, unemployment compensation, veteran's benefits, inheritances, alimony, child support payments, worker's compensation benefits, gifts, and lottery winnings.

# Lifeline Program **Household Worksheet**





## Your Information

All fields are required unless indicated. Use only CAPITALIZED LETTERS and black ink to fill out this form.

																					Т
First																					
																1					Т
Middle (option	al)																Suffi	х (ор	tiona	ıl)	
																					Т
	r hom	e add	ress	? (The	e addı	ress v	where	e you	will g	et sei	rvice.	Do	not ι	use a	P.O. E	Зох)					
	r hom	e add	ress	? (The	e addr	ress v	where	e you	will g	et sei	rvice.	. Do ı	not (	use a	P.O. E	Box)					
What is you			ress	? (The	e addı	ress v	where	e you	will g	et ser	rvice	. Do ı	not u	use a	P.O. E	Box)					
What is you			ress	<b>?</b> (The	e addi	ress	where	e you	will g	et ser	rvice.	. Do i	not u	use a	P.O. E	Box)					
What is you Street Number Apt., Unit, etc.			ress		e addr	ress v	where	e you	will g	et ser	rvice	. Do I	not u	use a	P.O. E	Box)					

## Lifeline Program

## **Household Worksheet**



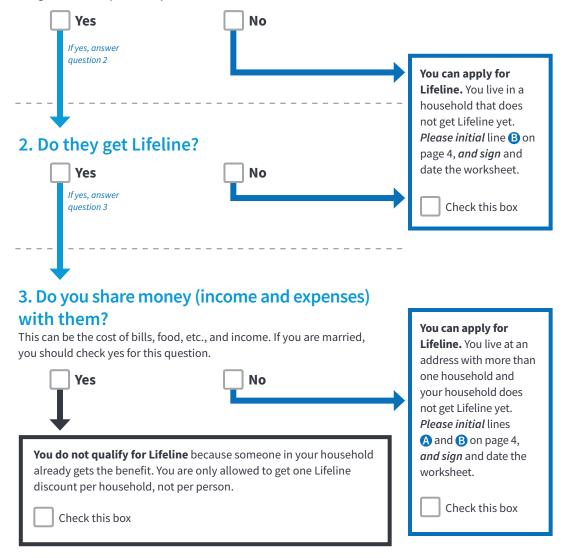


# Can you apply?

Follow this decision tree to confirm if you qualify for the Lifeline Program.

#### 1. Do you live with another adult?

Adults are people who are 18 years old or older, or who are emancipated minors. This can include a spouse, domestic partner, parent, adult son or daughter, adult in your family, adult roommate, etc.



# Lifeline Program **Household Worksheet**





## Agreement

Please initial the agreement below and sign and date this worksheet. Submit this worksheet to your service provider with your Lifeline Program Application Form.

I consent to let USAC contact me at my Lifeline phone number for important reminders and updates to my Lifeline service. Message and data rates may apply. Text STOP to end messages.

(A) I live at an address with more than one household.	
B I understand that the one-per-household limit is a Fed (FCC) rule and I will lose my Lifeline benefit if I break the	
Signature	Today's Date

#### Notice

**NOTICE:** Section 54.410 of the Federal Communications Commission's rules requires all Lifeline subscribers to demonstrate their eligibility to receive Lifeline services. If more than one person at the same address is applying for Lifeline service, all applicants must submit a Household Worksheet. This collection of information stems from the Commission's authority under Section 254 of the Communications Act of 1934, as amended, 47 U.S.C. §254. Using this authority, the FCC has designated USAC as the permanent Lifeline Administrator. The FCC has published rules detailing how consumers can qualify for Lifeline services and what Lifeline services they may receive (47 CFR §54.400 et seq.). The data provided in response to this information collection will be used by USAC to verify the applicant's eligibility for Lifeline services.

We have estimated that each response to this collection of information will take, on average, 0.25 hours. Our estimate includes the time to read and complete the form and review the form or response. If you have any comments on this estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, OMD-PERM, Paperwork Reduction Project (3060-0819), Washington, D.C. 20554. We also will accept your comments via the Internet if you send them to PRA@fcc.gov. Please DO NOT SEND COMPLETED DATA COLLECTION FORMS TO THIS ADDRESS.

Remember – You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid Office of Management and Budget (OMB) control number. This collection has been assigned an OMB control number of 3060-0819.

The Commission is authorized under the Communications Act of 1934, as amended, to collect the information we request in this form. We will use the information that you provide to determine your eligibility for Lifeline services. If we believe there may be a violation or potential violation of a statute or a Commission regulation, rule, or order, your form may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing, or implementing the statute, rule, regulation, or order. In certain cases, the information in your form may be disclosed to the Department of Justice, court, or other adjudicative body when (a) the Commission; (b) any employee of the Commission; or (c) the United States government, is a party to a proceeding before the body or has an interest in the proceeding.

If you do not provide the information we request on this form, you will not be eligible to receive Lifeline services under the Lifeline Program rules, 47 C.F.R. §§ 54.400-54.423.

The foregoing Notice is required by the Paperwork Reduction Act of 1995, P.L. No. 104-13, 44 U.S.C. § 3501, et seq.

**PRIVACY ACT STATEMENT:** The Privacy Act is a law that requires the Federal Communications Commission (FCC) and the Universal Service Administrative Company (USAC) to explain why we are asking individuals for personal information and what we are going to do with this information after we collect it.

**Authority:** Section 254 of the Communications Act (47 U.S.C. § 254), as amended, 47 U.S.C. §254, authorizes the FCC to operate the Lifeline program. Using this authority, the FCC has designated USAC as the permanent Lifeline Administrator. The FCC has published rules detailing how consumers can qualify for Lifeline services and what Lifeline services they may receive (47 CFR §54.400 et seq.).

**Purpose:** We are collecting this personal information so we can verify that you qualify for the Lifeline program and so we can efficiently provide Lifeline services to you. We access, maintain and use your personal information in the manner described in the Lifeline System of Records Notice (SORN), FCC/WCB-1, which we have published in 82 Fed. Reg. 38686 (Aug. 15, 2017).

Routine Uses: We may share the personal information you enter into this form with other parties for specific purposes, such as: with contractors that help us operate the Lifeline program; with other federal and state government agencies that help us determine your Lifeline eligibility; with the telecommunications companies that provide you Lifeline service; and with law enforcement and other officials investigating potential violations of Lifeline rules.

A complete listing of the ways we may use your information is published in the Lifeline SORN described in the "Purpose" paragraph of this statement.

**Disclosure:** You are not required to provide the information we are requesting, but if you do not, you will not be eligible to receive Lifeline services under the Lifeline Program rules, 47 C.F.R. §§ 54.400-54.423.