

Verizon Data Service

Name: _____ NUID: _____ AR: _____
 Email Address: _____ Phone: _____
☐ UNL Student
☐ UNL Faculty/Staff
☐ UNL Dept.
 Address: _____
Street Apt. City State Zip Code
 Signature: _____ Date: _____

I understand that by signing this contract that I am responsible for cellular service for one year. I agree to pay the monthly fee, any additional minutes and any other usage fees incurred.

UNL Department Employees Information:

Dept. Name: _____ Dept. Phone: _____
 Dept. Address: _____ Dept. Cost Object: _____

Mobile Broadband Plans

✓	Monthly Cost	GB Limit
	\$45.00	Unlimited

iPad/Tablet Plans

✓	Monthly Cost	GB Limit
	\$30.00	2GB
	\$45.00	Unlimited

For all the plans some restrictions apply. The billing period begins on the 28th of every month or the day you sign up for service, and ends on the 29th of the month. A **\$100 Early Termination Fee** will be charged for cancellations before contract completion. All plan changes will take effect at the beginning of the next billing cycle. Taxes and an Administrative Billing Fee of **\$1** will be charged on all plans. Overages will be charged at \$10 per GB. There will be a non-refundable **\$15 Activation Fee** for all new devices purchased. **Device purchases can only be billed if the total is \$50 or less. \$10 reactivation fee applies to phones suspended by UNL Telecom.** An approved Verizon device is required for service.

FOR OFFICE USE ONLY

Cell Phone #: _____
 ESN: _____
 Salesperson: _____
 Contract Length: _____

Excel	
MySoft	

Phone Type: _____

Accessories: _____

Location: Union 501

Paid: Cash Check

Credit Card NCard

Activation Fee: _____

Occupational Tax: _____

Sales Tax: _____

TOTAL: _____