Dear Hawaiian Telcom Customer,

Thank you for your recent request for Lifeline service. Lifeline provides discounts on local telephone service, or Internet in qualifying areas, if you meet certain Federal and/or State qualifications. Hawaiian Telcom is required to obtain proof of your eligibility in order for you to receive the monthly Lifeline credit on your bill.

Please review the enclosed Lifeline application. Initial next to the government benefit program(s) or income-based eligibility section that qualifies you for Lifeline service, and complete the remainder of the form including a phone number where you can be reached during the day. You must sign, date and mail the application to the address listed with any documentation required as proof for the Federal and/or State Lifeline credit(s). We must receive and approve your completed application before we can provide you with the Lifeline credit.

We appreciate your business and look forward to providing you with outstanding service. If you have any questions, please call us at 643-3456 or visit hawaiiantel.com.

Mahalo,

Hawaiian Telcom
Lifeline Service
Application & Customer Certification
Mail to: Hawaiian Telcom
1177 Bishop St, Ste 3 ATTN: SRC – Lifeline Team
Honolulu, HI 96813
For assistance call: 643-3456

Please review both programs. You may qualify for both Federal and State Credits.

LIFELINE - Federal Credits

Choose either Item 1 or 2 below to indicate how you qualify for Lifeline Service, then complete the rest of the application verifying with your initials that you meet qualifications in Items 4, 5, 6 & 7. Fill out all required customer information on page 2 and initial and sign where indicated.

1. I am enrolled in at least one of the following government benefit programs (place your initials next to all the benefit programs that apply to you).
   - Medicaid
   - Supplemental Nutritional Assistance Program (SNAP)
   - Supplemental Security Income (SSI)
   - Federal Public Housing Assistance
   - Veterans Pension Benefits or Survivors Pension Benefit
   - OR —

2. I meet the income eligibility requirement based on Federal Poverty Guidelines (FPG). Please initial here: ______

   My monthly total household income is: ________________
   Number of persons in my household is: ______

To qualify for income at or below 135% of Federal Poverty Guidelines:

- All gross income from any source actually received by all members of the household as defined by the Internal Revenue Service Certification of income-based eligibility must be accompanied by supporting documentation at enrollment. Acceptable documentation include prior year’s State or Federal tax return, current income statement from an employer or paycheck stub (3 consecutive months’ worth), a Social Security statement of benefits, VA statement of benefits, retirement statement, Unemployment/Workmen’s Compensation statement of benefits, Federal letter of participation in BIA General Assistance, a divorce decree, or child support documentation.
- Self-certification of the number of individuals in the household.

2018 Estimated Income Requirements for a Household at or below 135% of the Federal Poverty Guidelines:

<table>
<thead>
<tr>
<th>Persons in Family Unit</th>
<th>Income</th>
<th>Persons in Family Unit</th>
<th>Income</th>
<th>Persons in Family Unit</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$18,846</td>
<td>4</td>
<td>$38,975</td>
<td>7</td>
<td>$59,103</td>
</tr>
<tr>
<td>2</td>
<td>$25,556</td>
<td>5</td>
<td>$45,684</td>
<td>8</td>
<td>$65,813</td>
</tr>
<tr>
<td>3</td>
<td>$32,265</td>
<td>6</td>
<td>$52,394</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

For each additional person in household, add $6,710.

3. Required documentation
   - I am enclosing a photocopy of my document proving enrollment in at least one of the government benefit programs or documentation for the income-based eligibility.

4. The Lifeline Telephone Service is provided only at my principal place of residence in the State of Hawaii. I will notify Hawaiian Telcom within 30 days of my new address if I move. Please initial here: ______

5. I understand that only one (1) Lifeline service is available per household. Neither I nor anyone else in my household is receiving any Lifeline service or discount from any other telecommunications provider, including any wireless provider or broadband service provider. Please initial here: ______

A household is defined, for purposes of the Lifeline program, as any individual or group of individuals who live together at the same address and share income and expenses. Violation of the one-per-household limitation constitutes a violation of the FCC’s rules and will result in the subscriber’s de-enrollment from the program.

6. I will notify Hawaiian Telcom within 30 days if I no longer qualify for Lifeline service. I attest under penalty of perjury that I understand the notification requirement and that I may be subject to penalties if I fail to follow this requirement. Please initial here: ______

7. I acknowledge that once a year, Hawaiian Telcom will mail me a Lifeline re-certification form, which I MUST complete, sign, and mail back to Hawaiian Telcom before the renewal deadline. Failure to return the completed and signed form will result in the discontinuation of my Federal credits. Please initial here: ______

8. I understand that the Lifeline Service is Non-Transferable.

9. I understand that I cannot switch to another Lifeline provider within 60 days of initiating the Lifeline benefit for landline service with Hawaiian Telcom.

10. I understand that I cannot switch to another Lifeline provider within 12 months of initiating the Lifeline benefit for high-speed Internet service with Hawaiian Telcom.

Note: Free Toll Blocking provided upon request if you qualify for Federal credits.

See page 2 for State credit and required customer information and signature.
LIFELINE – State Credit

I meet the following criteria for the State credit (place a check mark in the box [☐] to the left of the type of documentation that you will provide as proof):

1. I hereby certify that I am 60 years of age or older, with an annual household income that does not exceed $10,000. I am enclosing a photocopy of ONE of the following as proof of age:
   - [☐] Driver’s License
   - [☐] State I.D.
   - [☐] Birth Certificate
   - [☐] Passport

2. I hereby certify that I am handicapped with an annual household income that does not exceed $10,000. I am enclosing ONE of the following as proof that I have an impairment that limits one or more of the following activities - caring for myself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning or working:
   - [☐] Statement from my physician
   - [☐] Certification from two persons other than my relatives
   - [☐] Completed Report of Confidential Social Security Benefit Information

2. The Lifeline Telephone Service is provided only at my principal place of residence in the State of Hawaii.

3. There is only one exchange access line (telephone number) serving my principal place of residence.

4. Once a year, Hawaiian Telcom will mail a State Lifeline re-certification form which I MUST complete, sign and mail back to Hawaiian Telcom before the renewal deadline. Failure to return the completed and signed form will result in the discontinuation of my State credits.

I fully understand that Hawaiian Telcom reserves the right to verify any of the statements in this application. If I knowingly make any false statements concerning my Federal and/or State Lifeline qualifications, I agree to pay all charges to return my service to regular rates, and to pay the difference between regular rates and Lifeline rates retroactive to the date when the application was made. I understand that Lifeline is a government benefit program and consumers who willfully make false statements to fraudulently obtain the benefit can be punished by fines and/or imprisonment and/or can be barred from the program. I hereby certify that I have read the Federal and/or State Lifeline qualifications and have check-marked the appropriate box/boxes.

I provide my consent to include the following information to the Administrator of the National Accountability Database to ensure the proper administration of the low-income program and understand that failure to provide consent will deny me the Lifeline benefit. The information to be provided to the Administrator includes: my name, address, and phone number, service initiation and de-enrollment dates (if and when de-enrollment occurs), the means through which I qualified for support, the last four digits of my Social Security number, my date of birth, and the amount of Lifeline support received each month.

I acknowledge that I have read, understand and agree to the terms and requirements of the Federal and/or State Lifeline programs. I also authorize Hawaiian Telcom to apply my Federal Lifeline discount to only one of the following services that applies to my account: Landline service, High Speed Internet or Bundle.

Under penalty of perjury, I hereby certify the information provided in the certification form(s) above is true to the best of my knowledge.

Please Initial here:  

<table>
<thead>
<tr>
<th>Customer Name (Please Print)</th>
<th>Telephone Number to Receive Lifeline Discount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Customer Service Address</td>
<td>Permanent</td>
</tr>
<tr>
<td>Customer Billing Address (if different)</td>
<td>City</td>
</tr>
<tr>
<td>Customer Last 4 digits of Social Security #</td>
<td>Customer Date of Birth (mm/dd/yyyy)</td>
</tr>
<tr>
<td>Customer Signature</td>
<td>Date</td>
</tr>
</tbody>
</table>

Is the service address on your Lifeline application on Hawaiian Homelands?  [☐] Yes  [☐] No

If yes, I hereby certify that my service address is on Hawaiian Homelands and understand that any false statements are punishable by fines and/or imprisonment.

Please Initial here:  

<table>
<thead>
<tr>
<th>Is the service address on your Lifeline application on Hawaiian Homelands?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

Please complete the customer information section above. All information provided by Hawaiian Telcom customers will be treated as confidential and will be used by Hawaiian Telcom solely to administer the Lifeline programs.

See page 1 for Federal credit