



- TELECOMMUNICATIONS
- LONG DISTANCE
- CABLE & SATELLITE COMMUNICATIONS, INC.
- INTERNET

DENY ORIGINATION

PERSONAL SAFETY EXCEPTION FORM

Customer Certification

If you are requesting Deny Origination, the responsible party must sign below.

CUSTOMER REQUESTING DENY ORIGINATION:

PRINT NAME: _____

SIGNATURE: _____

DATE: _____

TELEPHONE NUMBER WHERE DENY ORIGINATION WILL BE ASSIGNED:

Advisory: In the event the customer elects to receive local & long distance calls and the line is equipped with Deny Origination, that line will not be allowed any outgoing service.* Should an emergency arise, poison control centers, hospitals, medical centers and others will not be able to be reached. ***Access to 911/E911 is NOT allowed when Deny Origination is in place.**

BY MY SIGNATURE ABOVE REQUESTING DENY ORIGINATION, I ALSO, ACKNOWLEDGE THAT I UNDERSTAND THE ABOVE ADVISORY ON THE DENY ORIGINATION FEATURE; AND I RELEASE VALLEY TELECOMMUNICATIONS COOPERATIVE ASSOCIATION FROM ALL CLAIMS AND LIABILITY, INCLUDING PERSONAL INJURY, CAUSED BY MY ELECTION TO RECEIVE THE DENY ORIGINATION FEATURE.