



# AMU

## Cable TV Application

Website: [www.netamu.com](http://www.netamu.com)  
104 W. Call Street • Phone: (515) 295-3584  
E-mail: [amu@netamu.com](mailto:amu@netamu.com)

**Pre-payment:**

\$ \_\_\_\_\_

Name: \_\_\_\_\_

Date of Appointment: \_\_\_\_\_

Address: \_\_\_\_\_

Time of Appointment \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_

Work: \_\_\_\_\_

Social Security #: \_\_\_\_\_

### 1. Cable Service (check one):

- Free Installation

- Basic
- Expanded Basic
- Digital Basic  
(Requires Digital, HD, or HD/DVR Gateway)

### 2. Choose any Gateway and receive:

- Free Installation, 1 Converter Box, PPV, DMX Music, Premium Multiplex (Additional Costs)

- Digital Gateway
- HD Gateway
- HD/DVR Gateway

### 3. Premium Multiplexes (Requires Digital, HD, or HD/DVR Gateway)

- One Premium
- Two Premiums
- Three Premiums
- Four Premiums
  - HBO
  - Showtime/TMC
  - Cinemax
  - Starz/Encore

### 4. Additional Cable Equipment:

- Additional HD Converter
- Additional Dual Tuner DVR
- Additional DCT

### 5. HDTV:

- HDTV Expanded Basic
- HDTV Expanded Basic with Cable Card

In making this application, I agree to the rules and regulations of Algona Municipal Utilities as set forth in the AMU Communications Policy, and to the general changes in rules or rates for the service furnished under this application. I understand that any Unreturned cable boxes (Digital and/or Analog) and remote controls will be billed to me (the consumer) at current replacement cost.

\_\_\_\_\_  
Customer Signature and Date

\_\_\_\_\_  
AMU Representative and Date

\_\_\_\_\_  
Print Name