

Step 1

**InTRAC APPLICATION
FOR FREE EQUIPMENT PROGRAM**

Name: _____ Address: _____
(No P.O.Box)
City: _____, IN Zip: _____ Phone: (____) _____
E-mail: _____

Date of Birth: _____ Deaf Hard of Hearing Speech Impaired Male Female
* How did you hear about us: TV Radio Newspaper Conferences Others _____

ELIGIBILITY

Citizen of Indiana • Deaf • Hard-of-Hearing • Speech Impaired • Annual household income below \$74,000
(Consideration will be given if extenuating circumstances exist.)

ATTACH TO APPLICATION

Step 2

Provide proof of financial information such as **Federal Tax Form 1040** or **Social Security Letter** or **paycheck stub** (You may blackout your SSN)

Step 3

CapTel™ applicants **exceeding** income limit, please use reverse side of this application.

Step 4

Choose ONE of the following models:

<input type="checkbox"/> CapTel 840 (analog telephone line required)	Flashing Light Signaler <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> CapTel 840i (telephone line AND internet required)	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> CapTel 880i (telephone line AND internet required)	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> CapTel 2400i (telephone line AND internet required)	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Superprint 4425 <input type="checkbox"/> Uniphone 1140	

(Limit one per household and at least 4 years before applying for new replacement)

***Step 5**

READ AND KNOW YOUR RESPONSIBILITIES

_____ Yes, I understand and agree to my responsibilities below when borrowing equipment from InTRAC.

- If the equipment is stolen or damaged by fire, you must report the theft or damage to your local police. You are required to mail a copy of the report to InTRAC within five (5) days.
 - If the equipment is damaged, lost or destroyed because of carelessness or misuse by you or persons known to you, you are required to pay for the repair or replacement of the equipment.
 - You need to understand what qualifies as "carelessness or misuse", "including, but not limited to:
 - Using the wrong type battery
 - Damage due to being dropped
 - Food or liquid spills inside the machine
- * Tampering with or trying to fix equipment yourself • Insect infestation which destroys the circuits.

Step 6

I declare under penalties of **perjury** that the information above is true.

Signature _____

Date _____

Step 7

Please mail *this* side of application to:

**InTRAC, 7702 Woodland Drive, #130
Indianapolis, IN 46278
317-334-1413 (v) 877-446-8722 (toll free)
info@relayindiana.com**