

Safe Connections Line Separation

Leave or remove someone from a multi-line account due to domestic violence or abuse.

Enter your personal information:

1. Last name, first name (Survivor) _____
2. Name of alleged abuser as known to you: _____
3. Phone numbers to separate from a multi-lined account shared with the abuser **(Between A) and B), only select one):**
 - Survivor line(s): _____
 - OR
 - Alleged abuser line(s): _____

If you would like to separate additional lines on the same account (others in the survivor's care), please list here

Note: Any watch/tablet lines associated with the lines for which you are requesting separation will also be separated from the original account through this process

Note: If the alleged abuser's line(s) are being separated, Cricket will contact you before proceeding with the request. A signed and dated statement that the alleged abuser is the user of the line being requested for separation is required before beginning the separation process.

4. Email Address _____

Note: Email may be used to send confirmation of your line separation submission.

5. If we need to get in touch about this line separation request, please choose your preferred contact method and list your email or phone number:
 - Email: _____
 - Phone Call: _____
 - Text: _____

Note: If you select "Phone Call," Cricket may still need to use the email address, provided above, to send written confirmation of the request.

6. Is the survivor's credit card information a saved payment method on the account?
- Yes
 - i. If yes, do you want OOP to remove the credit card from the account?
 - Yes
 - No
 - No
7. Is the survivor's credit card information used for AutoPay on the account?
- Yes
 - i. If yes, do you want OOP to de-enroll the account from AutoPay?
 - Yes
 - No
 - No

Note: If OOP is de-enrolling the account for AutoPay, the alleged abuser will be notified the account has been de-enrolled from AutoPay once the line separation is complete.

8. Preferred language:
- English
 - Spanish

9. Address to be used for new account setup (Street, City, State, Zip)
-

10. Are you submitting this request on behalf of the survivor?

- Yes
 - i. If you are submitting on behalf of the survivor, please state your name (last name, first name)

 - ii. Relationship to survivor

- No

11. Do you want to keep the current rate plan(s) associated with the line(s) being separated? To select a new plan, please go to [Prepaid Phone Plans With 5G Nationwide | Cricket Wireless](#) and indicate below which rate plan(s) you'd like.

- Yes I want to keep my plan(s)
- I want to change my plan(s)
 - i. New plan:
- I don't know what plan is best for me, please contact me

Note: If you are changing your rate plan, you understand and acknowledge that you have read and agree to the Cricket Wireless Terms and Conditions of Service, including its provisions requiring dispute resolution by binding individual arbitration, which can be found at [cricketwireless.com/terms](https://www.cricketwireless.com/terms).

12. If we have all of the information we need and there are no issues, can we process the request without any additional contact? If you say yes, we will complete the process within 2 business days if we have all the information we need. If you say no or we do not have all the information we need, a representative will reach out to you prior to processing the request.

- Yes
- No

13. Submit one of the following documents from the list below that verifies that an individual who uses a line on the multi-line account has committed domestic violence or other related crimes against the survivor or someone in the survivor's care. In addition, the following describes what will need to be submitted based on the request.

If survivor is requesting ONLY their line to be separated	If more than just the survivor's line is being separated	If the alleged abuser's line is being separated	If someone is submitting on behalf of survivor (designated representative)
A statement saying the survivor is seeking relief under the SCA, and identifying the survivor's lines	A signed and dated affidavit that the individual is in the care of the survivor and is the user of the specific line(s)	A statement that the alleged abuser is the user of the specific line(s)	A statement explaining the name and relationship of the designated representative to the survivor and that they are assisting the survivor with the process.

Accepted Verification Documents include (only one of the following is needed):

1. Copy of signed affidavit from a:
 - Licensed medical or mental health care provider
 - Licensed military medical or mental health care provider
 - Licensed social worker
 - Victim services provider
 - Licensed military victim services provider
 - An employee of the court acting within the scope of that person's employment

2. A copy of:
 - Police report
 - Statements provided by police (including military or tribal police) to magistrates or judges
 - Charging documents (a formal accusation alleging that someone committed an offense)
 - Protective or restraining orders

- Military protective orders

Any other official record that documents the covered act (this include documents from a state agency such as child protective services)or

3. Self attestation - For New York State residents only [Add PDF URL]

Notes:

- The survivor's name on any attached document should match the name used on the request to separate a line(s)
- The alleged abuser's name as known to the survivor should also be included in the attached document.
- We'll protect your identity and delete the documents within 30 days of completing the line separation request.

You may be eligible for an emergency support benefit through the Lifeline program that can be used toward eligible services. For details on eligibility and application, visit <https://nv.fcc.gov>.