APPLICATION FOR TELECOMMUNICATION SERVICE

tfl
The World at your fingertips

Business Customer

PLACE A TICK IN THE BOX

☐ Prepaid   ☐ Postpaid   ☐ Misc

ESSENTIAL DOCUMENTS REQUIRED WHEN APPLYING (CERTIFIED)

☐ Business Registration   ☐ Certificate of Incorporation   ☐ Particulars of Directors

BUSINESS DETAILS

Company Name in full

Type of Business   Company Registration NO.

Name of Directors   Particulars of Directors

Registered Office   Contact Number:

TRADING NAME

ADDRESS WHERE SERVICE IS REQUIRED

House Number   Street Name   Lot Number

Building Name   Floor Unit Number   Stage Area

Block/Quarters Number

BILLING ADDRESS

Box Number   Street Number

Town/City   Urban/Rural

CLASS SERVICE (fees may apply)

Prepaid ☐   Full Service ☐   Bar IDD ☐   Bar Vodafone ☐

DIRECTORY LISTING ☐ Y   ☐ N

CONNECTION TO OTHER TERMINAL EQUIPMENT

Modem ☐   Router ☐   PABX ☐   Other ☐

Contract Term   1 Year ☐   2 Years ☐   3 Years ☐

SERVICES REQUIRED

☐ No of Lines [_____]   Intended Use: ☐ Telephone   ☐ Fax   ☐ Internet

Require previous phone number at premises: ☐ Y   ☐ N

Easytel Required: ☐ Y   ☐ N   Call Minder ☐ Y   ☐ N

ISDN ☐ BRI   ☐ PRI   ☐ **Smartlink**   ☐ **0800**   ☐ **Data Service**   ☐ Other   ☐ Broadband

INSTRUMENT OPTIONS

Rent ☐   Own Phone ☐

OTHER SERVICES REQUIRED ☐ **Y**   ☐ **N**

DECLARATION

I/We hereby:
   (a) certify that the particulars hereinabove provided are true and correct;
   (b) agree to pay on demand all charges made by the Company in connection with the above service;
   (c) declare that I/We have read, understood and agree to comply with and be bound by the provision of
       Telecom Fiji Limited's standard terms and conditions, a copy of which has been provided to me/us.

BUSINESS

The Rubber Stamp/Common seal of [_____] Limited, was hereunto affixed before us and we certify
that we are the Proper officers by whom presence the said seal is to be affixed

Director / Secretary / Personal   Company stamp

Name   Date

SKETCH OF ADDRESS WHERE SERVICE IS REQUIRED

FOR OFFICE USE ONLY
Received by: EDP/Date: Cable Number   MDF/Pr

DP-   DP Pr –   D Side   E Side

Spans   Surveyor   Comments