

Application

For Re-Location of a CityLink Service



Serious Broadband

Customer Details

* Must be completed

Full name of Customer*	
Trading Name (if any)*	
Order Number (if any)*	
CityLink Quotation Reference (if any)*	
Description of your main business activity	

Contact Person for this Agreement

Name	
Phone Number	
Email Address	

Invoicing Contact Details

Name* and Position of Contact Person for invoicing	
Invoice Postal Address (<i>PO Box #</i>)*	
Billing contact phone*	
Billing contact fax	
Billing contact email	
Email Address for invoice (<i>If applicable</i>)	
Direct Debit Option (<i>Tick if required</i>)	<input type="checkbox"/> Please complete a Direct Debit Authority

Relocation Required

Present Service	
Circuit # / Service ID	
Service Description / Type	
End User Name (if different from Customer)	
Service Requirement Date (by Close Of Business)*	
Internet Service Provider / Service Provider <i>(if applicable)</i>	

For FibreLINK or PrivateLAN Connections only, site not changing:

Building Name	
Street Address & Floor No	
City	

All Connections:

Relocating (Existing Site):	
Building Name	
Street Address & Floor No.	
City	
Date Disconnection Required NB: <i>Dual service at both locations is offered for 1 week as standard.</i>	

New Location:	
Building Name	
Street Address & Floor No.	
On-Site Contact Name & No.	
City	

Installation Fee	New Monthly Fee
\$	\$

New Contract Period: 24 months 36 months

Technical Contact Details

Technical contact name	
Position	
Technical contact phone(s)	
Technical contact fax	
Technical contact email	

Building Detail if known...

Building manager name(s)		Tel
Building manager location		
PABX room on floor number(s)?		

PLEASE NOTE:

This form is to be used for the changes required to an existing service. The Account Manager must ensure that a new Service Agreement Form for the relevant service is completed in conjunction with this application and signed by the customer.