

ADSL SERVICE APPLICATION FORM

Applicant Information (Part A)				
Name (Full Name or Company Name):				
Current	Side:			
Island:	Email Address:	Mobile Number:		
Phone Line Availability: YES <input type="checkbox"/> NO <input type="checkbox"/>		Phone Number:		
Internet Plans (Part B)				
Please tick <input checked="" type="checkbox"/> the appropriate plan of your choice below:				
TICK <input checked="" type="checkbox"/>	ADSL PLAN	SPEED (shared)	DATA CAP	MONTHLY FEE
<input type="checkbox"/>	Ocean50	128 kbps	5GB	\$50.00
<input type="checkbox"/>	Ocean100	256 kbps	12GB	\$100.00
<input type="checkbox"/>	Ocean200	256 kbps	25GB	\$200.00
<input type="checkbox"/>	Ocean300	256 kbps	32GB	\$300.00
<input type="checkbox"/>	Ocean500	384 kbps	60GB	\$500.00
<input type="checkbox"/>	Ocean750	512 kbps	100GB	\$750.00
<input checked="" type="checkbox"/>	Installation Fee	-	-	\$50.00
Reconnection and Shifting (Part C)				
TICK <input checked="" type="checkbox"/>	DESCRIPTION	CHARGES	DATA CAP	MONTHLY FEE
<input type="checkbox"/>	Reconnection Fee	\$50.00	-	-
<input type="checkbox"/>	External Shifting	\$50.00	-	-
<input type="checkbox"/>	Internal Shifting	\$25.00	-	-
DECLARATION (Part C)				
(a) I /We hereby certify that the particular hereinabove provided are true and correct (b) I/We hereby agree to pay on demand all charges made by the company in connection with the above service (c) I/We hereby declare that I/We have read, understood and agree to comply with and be bound to the terms and conditions of services , which is also available at any Tuvalu Telecom main office and stations in the country (d) I/We hereby agree to inform Tuvalu Telecom's Customer services 14 working days before leaving the above address or residence, should I change address or leave the country				
Signed by Applicant:			Date: ___/___/_____	
Approved by (IT Manager):			Date: ___/___/_____	
FOR OFFICIAL USE ONLY				
		CALCULATED CHARGES		
		TOTAL		
		TCT (7%)		
		BALANCE DUE		
		RR #: _____	Payment Date: ___/___/_____	