



Registration No : PQ 7

APPLICATION / AGREEMENT FOR QUICKMEET AUDIO CONFERENCING SERVICE

(To be filled by SLT staff)

CR NO.

Grid for CR NO.

Date

DD

MM

YYYY

Account No. in enclosed envelope

(To be filled by SLT staff)

Grid for Account No.

1. Customer Information

1.1 Name of Customer /Company / Partnership/Sole proprietorship

Grid for Customer Name

Name of the proprietor if a proprietorship

Grid for Proprietor Name

Name of the partners if a partnership

Grid for Partners Name

1.2 Billing Address

Grid for Billing Address

1.3 Contact Information

a. Name of the contact person

Grid for Contact Name

b. National identity card Number /Passport number / Business registration Number

Grid for ID/Passport/Reg. No.

c. Designation (if applicable)

Text box for Designation

d. Contact Numbers

Telephone

Grid for Telephone

Mobile

Grid for Mobile

E-mail

Text box for E-mail

Fax

Grid for Fax

2. Package Details

2.1 Required service

a. New service

b. Change of existing service

(Note: Please indicate the service you request under b.1 to b.4 below)

b.1. Package change

Name the existing package

Plus Five

Plus Ten

Plus Twenty

Twenty Plus

b.2. Recording facility

b.3. Change of storage

Existing storage space

 GB

b.4. Change of on-demand conferencing PINS

2.2 Package Type

Plus Five

Plus Ten

Plus Twenty

Twenty Plus

No. of participants for twenty plus

Whether the conference Call recording Service is required (Optional)

Yes

No

2.3 Required capacity for storage

 1 GB 2 GB 3 GB 4 GB 5 GB

3. Service Information

3.1 Telephone number (if SLT phone number is available)

3.2 Account number (if account number is available)

(for SLT service)

3.3 Service Address

4. Declaration

- 1 I/We agree to treat this as constituting a formal service contract.
- 2 I/We understand that this application is only for QUICKMEET Audio Conferencing Service.
- 3 Having read and understood all the price / rate plans / terms and conditions related for provisioning of QUICKMEET Audio Conferencing Service by SLT, I undertake to bind by the terms and conditions stated herein and any amendments or additions thereto.

.....
Signature(s) of the Legal Owners(s)

.....
Date

* In case of a business entity signatory must be duly authorized to sign this application

5. For Office Use Only

a. RTOM area

b. Customer provided the following on registration (please tick)

b.1 Copy of business registration (in case of a registered company)

b.2 Documentary evidence (in case of sole proprietorship/partnership/SME/SOHO/Individual)

National Identity card Passport Driving license Other

b.3 Copies of utility bills to prove billing address (not applicable for current SLT customer)

Water bill Electricity bill

All necessary documents are furnished by customer

Signature of authorized officer of SLT

Date

Service No: