

CORPORATE LANDLINE PROVISIONING FORM

Please complete the details below to request new landline telephone services.

Company Information

REGISTERED COMPANY NAME

COMPANY REGISTRATION NUMBER

TAX / VAT IDENTIFICATION NUMBER

BILLING ADDRESS

Contact Information

PRIMARY CONTACT PERSON

JOB TITLE

CONTACT NUMBER

EMAIL ADDRESS

Service & Installation Requirements

INSTALLATION ADDRESS (IF DIFFERENT FROM BILLING)

CONNECTION TYPE

NUMBER OF LINES / CHANNELS

PREFERRED INSTALLATION DATE

DIRECTORY LISTING

Additional Features & Hardware

VALUE ADDED SERVICES REQUIRED

CALLER ID (CLI)

CALL FORWARDING

LINE HUNTING

VOICEMAIL

HARDWARE / HANDSET REQUIREMENTS

Authorisation & Agreement

By signing below, the corporate customer requests the provisioning of the services detailed above and agrees to the standard terms and conditions of service.

AUTHORIZED SIGNATORY NAME

DESIGNATION / TITLE

Authorized Signature & Company Stamp

DATE

[Submit Application](#)