



# VoIPex Dial Up Order Form

**VoIPex Pty Limited**  
(ABN 44 102 443 532)  
42 Union St  
WICKHAM NSW 2293  
PO Box 544  
Kotara NSW 2289

New Account  Add New Service  Amend Details  Cancellation  Account No.

Existing Customer Only

## SECTION A – CUSTOMER INFORMATION (Please complete all fields)

**Name** Title  First Name  Last Name   
**Contact Details** Phone No  Fax No  Mobile No   
E-Mail Address   
**Address**

## SECTION B – SERVICE INFORMATION (Please choose the Service Type/s and record amount for each. Ensure "Total" is completed)

t	Service Type	Description	Price	n	Amount
<input type="checkbox"/>	Standard Dial				
<input type="checkbox"/>	Monthly Dial	Monthly 75 hours dial with 4 hour sessions, 5 emails and 10MB web storage. (Excess hours charged at 20 c per hour. Capped at \$24.95)	\$ 14.95		\$
<input type="checkbox"/>	Annual Dial	Annual unlimited dial with 2 hour sessions, 5 emails and 10MB web storage.	\$ 132.00		\$
<b>Bulk Hour Plans</b>					
<input type="checkbox"/>	25 Hours	25 Hours of dial up access with 5 emails & 10MB web storage. (12 month expiry)	\$ 33.00		\$
<input type="checkbox"/>	100 Hours	100 Hours of dial up access with 5 emails & 10MB web storage. (12 month expiry)	\$ 110.00		\$
<b>Email Only</b>					
<input type="checkbox"/>	Email Account	Single email account (annual fee)	\$ 66.00		\$
<b>Total Amount</b> This amount will be the initial payment due and applied against the payment method chosen in section D					\$

\* All plans renewed for same term unless otherwise instructed

## SECTION C – PROVISIONING DETAILS (Please complete the section/s relating only to the service/s ordered)

### Internet (Dialup)

Preferred Username: \_\_\_\_\_ Preferred Password: \_\_\_\_\_  
Email 1: \_\_\_\_\_@voipex.com.au Email 2: \_\_\_\_\_@voipex.com.au

## SECTION D – PAYMENT INFORMATION (Please tick only one method of payment. Cash or direct credit is not available.)

Date of Birth  Mothers Maiden Name  Drivers Licence   
 Direct Debit  Please complete Direct Debit Request  Credit Card  Please charge my Credit Card indicated below  
 MasterCard  Visa           
**Cardholder's Details** Name on Card \_\_\_\_\_ Signature \_\_\_\_\_  
**Card expiry date**      
Month Year

## SECTION E – DECLARATION / PRIVACY ACT

I declare that:

- I have read the Standard Terms and Conditions and Acceptable Usage Policy and agree to be bound by them.
- I authorise VoIPex to collect personal information from or about employees, principals or directors of the Customer in order to process the Customer's application. I am authorised to disclose the personal information contained in this application to VoIPex and consent on behalf of the individuals named in this Application to allow VoIPex to use and disclosing this personal information
- If VoIPex considers it relevant to assess this application for personal or commercial credit, I agree to VoIPex obtaining from a credit agency a credit report containing personal information about the employees, principals or directors of the Customer in relation to personal or commercial credit provided by VoIPex.
- I understand that once this Order Form is sent to VoIPex by way of fax, e-mail, postal service or hand delivered, the setup costs are payable and non refundable.
- I acknowledge that in the event of the agreed term of the contracted services not completing full duration, I understand that the balance remaining becomes due and payable by the Customer and/or Service Owner and agree on behalf of the customer to pay VoIPex the full amount on demand.
- I understand and agree that this form commits the Service Owner and Customer to a fixed term agreement which renews for the same term in the absence of written alternative instructions.
- I have authority as the Service Owners and Customer's agent to make this application and confirm that the information in this Application is true and correct.

Authorised Signature  Date   
Name (print)  Position