



BROADBAND APPLICATION FORM

For Office Use Only

Installation AN Number:

Cessation AN Number:

Customer Details

Name:

Address:

Organisation:

Residential Area/Region:

Customer Category:

Work Tel:

Home Tel:

Term of contract:

Payment Plan:

Billing Account:

Security Deposit

Overseas Address:

Service Request Details

Action:

Broadband Package:

Modem:

Email Account Details

Password must consist of 7 alphanumeric characters with at least one uppercase and one number

User ID:

SA6874

Password:

wireL3ss

Published Email Address

☐

Email Address:

E-billing
Address:

Service Pack Contents

Please tick to indicate you have read:

Internet Terms and Conditions ☐

Internet Acceptable Use Policy ☐

Internet Service Schedule ☐

Internet Price List ☐

Customer Service Charter ☐

Customer Agreement

I have read, and agree to, the service documentation as listed in 'Service Pack Contents'.

Customer Signature:

Acceptance Date:

Service Date:

Please complete and return this form to:

Retail, Marketing and Customer Services, Sure South Atlantic Ltd (Ascension) South Atlantic
Ocean, ASCN 1ZZ

For further information please call Customer Services on 111 or Email ASI-customer.service@sure.com