

1. Personal Information

What is the intended use for this connection?

Private ☐

Business ☐

Title: Mr. ☐ Mrs. ☐ Miss. ☐ Ms. ☐ Other ☐ Registered Company ☐ ABN ☐ ACN ☐ ARBN ☐

ABN:

Please mention the number you want the broadband connection on

☐ I don't want my landline number also to be transferred to Slimtel

If you are existing Slimtel customer please mention your 8 digits account number

Last Name/Company Name: _____ First Name: _____ Initial: _____

Current Address: _____

Suburb: _____ State: Postcode: _____

Best number to reach you: (Day time) (Evening Time)

Mobile Number: 04 Email: _____@_____

Permanent Australian Resident: Yes ☐ No ☐

Residential Status: Own ☐ Buying ☐ Renting ☐ Boarding ☐ Living with parents ☐

Time at current address: ☐ Less than 6 months ☐ 6 months to 12 months ☐ 12 months to 3 years ☐ 3 years or more

2. ID Verification Information: (at least one required)

● Driver's License

License Number: _____ Expiry Date: ____/____/____ DOB: ____/____/____

● Current Australian Passport

Passport Number: _____ Expiry Date: ____/____/____

● Current Australian Passport

Tertiary Student Card: _____ Residential visa Expiry Date: ____/____/____ Work visa Expiry Date: ____/____/____

● Change Please provide a copy of your ID that you have mentioned on this form. If you need to send it later please email to info@slimtel.com.au. Without proper ID verification your application may be delayed. This information as well as section from will determine your credit eligibility and a credit check may or may not be done. We may require more information and will contact you if we need to do so.

3. Service Detail:

Service Line Number: Package: _____

Contract Term (Months) Price (AUD): _____

Modem Included: Yes ☐ No ☐

*You are aware that broadband may not be available in your area and we cannot guarantee we can provide this service, if this is the case we will notify you or any regional surcharges. If you are in a contract term, the contract termination fee is 50% of the monthly charges multiplied by the months remaining in contract and is not negotiable however a change of residence is permitted for a small fee if and when you need to move, provided we can service the area

4. Account Payment Information

How would you like to receive your account?

☐ Email Bill ☐ Email address as above OR:

☐ Paper Bill (\$ 1.98 monthly fee applies)

SLI GEN 11482

How would you like to pay your account? (Payments is by direct debit only to credit card or bank account)

Payment method - Direct Debit ☐ Yes ☐ No (If no, a non-direct debit fee of \$2.97 will apply)

Direct debit details:

☐ **Credit Card**

Credit card type ☐ MasterCard ☐ Visa ☐ Bankcard ☐ Amex ☐ Diners Cardholder name: _____

Credit card number _____ Expiry Date: ____/____/____

By signing this form, I/we authorise Ezi Debit Australia Pty LTD acting on behalf of the business to debit payments from my specified credit card above, and I/we acknowledge that Ezi Debit Australia will appear as the business on my credit card statement.

☐ Direct debit to Bank Account:

Financial Institution: _____ Branch: _____ Account Name: _____

BSB 6 Digits _____ Account Number (9 digits max) _____

By signing this form, I/we authorise Ezi Debit Australia Pty LTD User ID to debit my/our account the Financial Institution identified above through the Bulk Electronic Clearing System (BECS) in accordance to the Payment Details stated above and as per the Service Agreement provided.

This Authorisation is to remain in force in according with the Terms and Conditions on this page, the provided service Agreement and I/we have read and understand the same.

Customer's Name _____ Customer's Signature _____ Date ____/____/____

If sufficient funds are not in your bank account or credit card on the due date of the invoice, which we deduct 14 days after the invoice for you to view the charges you will incur up to a \$44 dishonour fee for charges Slimtel incur from our banking institutions and follow procedures and charges.

5. Other Information

Are you currently with any other provider? ☐ Yes ☐ No If yes please provide the name of the provider: _____

Desired User Name: _____@slimnet.com.au Password: _____ (letters and numbers only, no symbols)

* It will take at least 4-5 working days to activate, we will send you a welcome letter via email once we have the exact date for the cutover.

What other Slimtel products you are interested in?

☒ Mobile ☒ Landline ☒ SlimTV ☒ Mobile Phones ☒ Hardware and Accessories

Refer us a friend or family member and win free credits and so may exciting prizes.

Name: _____ Email: _____@_____

Phone: _____ Mobile: 04 _____

6. Authorisation

☐ Please keep me updated about your new promotions and latest offers.

Signature: _____ Date: ____/____/____

* By signing this form you agree to our terms and conditions, visit <http://www.slimtel.com.au/legal> for terms and conditions

Dealer Code: _____

Sales person signature: _____