



## OUT OF THIS WORLD INTERNET SOLUTIONS

### APPLICATION CHECKLIST

(PAGE 1)

Please complete this form electronically and save it before signing it. Please email both the unsigned and signed versions to sales@asap.net.za (in a single email). The unsigned version is required for extraction of the information whilst the signed version will be retained for contractual purposes.

#### Documentation Required for Internet Access Service

- Signed Agreement (Initialled and signed where applicable)
- ID Book or Passport of Authorised Signatory (This is a legislated requirement and we cannot proceed without it – RIC Act of 2002)
- Debit Order and Mandate – Signed with the correct banking details.

Where the debit order mandate has not been completed in full and signed, service shall be provisioned on a prepaid basis and the payment method shall be either EFT ONLY. No Cheques accepted, and Cash deposit fees are applicable at the prevailing ASAP's bankers' charges.

If you are opting for prepaid service or the monthly postpaid service charge you are subscribing to is below R2,000.00 (excluding installation & upfront charges), you may sign and initial the relevant parts of this agreement electronically. Where a higher monthly service fee is required, please print the agreement, sign the original, and scan it. Please retain the original paper agreement as we may request it.

Clients that require a prepaid service need to provide a recent document verifying Proof of Address.

Estimated processing time	Regular	Expedited
Account opening and new service activation (no hardware/install required)	3 Working Days	1 Working Hours
Account opening and new service activation (including hardware/install delivery)	5 Working Days	3 Working Days

ASAP Internet shall make every effort to adhere to the turnaround times set out above, however, cannot guarantee said time frames. Complete and correct paperwork is a prerequisite. If you would like to expedite the provisioning of services, please indicate as such under the Special Instructions section of this Agreement. Expedited provisioning is subject to a once-off surcharge should capacity be available. Where a third-party provider is required, these estimated times may not be relied upon.

087 550 1891 | help@asap.co.za | www.asap.co.za | P.O. Box 662, Bothas Hill, 3660 South Africa



ASAP is the holder of the following ICASA-issued licenses:  
Individual Electronic Communication Network Services No. 0199/IECNS/JAN/09  
Individual Electronic Communications Services No. 0199/IECS/JAN/09

Director A.J. Futter | ASAP Internet (Pty) Ltd | Reg. 2000/022917/07 | Vat No. 4650198668

# AGREEMENT

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## BETWEEN

"CLIENT"	
Type	
Name	
Identity / Registration number	
VAT number	
Phone number	
Postal address	Physical address

## REPRESENTED BY

"SIGNATORY"	
Name	
Identity number	
E-mail address	
Mobile number	
Alternative Number	

## AND

"ASAP"	
Name	ASAP Internet (Pty) Ltd
Registration number	2000/022917/07
VAT number	4650198668
Phone number	087 550 1891
Postal address	PO Box 661 Bothas Hill 3660
Physical address	6 Pine Lane Bothas Hill 3610

INITIAL: \_\_\_\_\_

## DEBIT ORDER AUTHORITY AND MANDATE (PAGE 3)

"BANK ACCOUNT"			
Bank name		Account number	
Branch name		Branch number	
Account type		"DEBIT DAY"	
"START DATE"		"INTERVAL"	Monthly

1. CLIENT hereby authorises ASAP to issue and deliver payment instructions to ASAP's banker for collection against CLIENT's BANK ACCOUNT at CLIENT's BANK as set out above (or any other bank or branch to which CLIENT may transfer CLIENT's account) on condition that the sum of such payment instructions will never exceed CLIENT's obligations as agreed to in the AGREEMENT.
2. The payment instructions so authorised shall be issued and delivered at the INTERVAL set out above on or after the DEBIT DAY set out above commencing on or after the START DATE set out above until this authority is cancelled by CLIENT by giving ASAP notice in writing of not less than one calendar month and sent by prepaid registered post or delivered to your address indicated above.
3. If the DEBIT DAY falls on a Saturday, Sunday, or public holiday, the payment instruction will be delivered on the PRECEDING business day.
4. The details of each payment instruction shall reflect on CLIENT's bank statement in the form of the abbreviated name "ASAP" followed by the ACCOUNT NUMBER, so as to enable both CLIENT and ASAP to identify the AGREEMENT. The said ACCOUNT NUMBER shall be communicated to CLIENT before the issuing of any payment instruction.
5. ASAP shall provide to CLIENT a monthly tax invoice and/or statement of account clearly reflecting the AMOUNT, DATE and ACCOUNT NUMBER of the payment instruction to be delivered.
6. CLIENT acknowledges that all payment instructions issued by ASAP shall be treated by CLIENT's above-mentioned bank as if the instructions had been issued by CLIENT personally.
7. CLIENT agrees that although this authority and mandate may be cancelled by CLIENT, such cancellation will not cancel the AGREEMENT. CLIENT also understands that CLIENT cannot reclaim amounts which have already been paid from CLIENT's BANK ACCOUNT in terms of this authority and mandate if such amounts were legally owing to ASAP.
8. CLIENT acknowledges that this Authority and Mandate may be ceded or assigned to a third party if the AGREEMENT is also ceded or assigned to that third party however, in the absence of such assignment of the AGREEMENT, this Authority and Mandate cannot be assigned to any third party.

ACCEPTANCE			
Signed		Date	
		Place	
for and on behalf of CLIENT by SIGNATORY (who warrants that he/she is duly authorised)			
"ACCOUNT NUMBER"			
		(To be completed by ASAP)	