



ASAP

OUT OF THIS
WORLD INTERNET
SOLUTIONS

APPLICATION CHECKLIST

Please complete this form and email a signed copy back to sales@asap.net.za or WhatsApp a copy to 0833200718 together with;

- a) a copy of your ID Document
- b) signed Service Order form
- c) if the account is in the name of a company or business –
 - a. a copy of the company registration document
 - b. the director’s ID Document who has signed this form and the Debit order mandate.
- d) a recent document verifying Proof of Address

which shall form the basis of a master service agreement for services as provided by one or multiple service orders submitted to ASAP by the client for services, each with their own terms and conditions pursuant to the service order and ASAP’s Standard Terms and conditions.

AGREEMENT

BETWEEN

"the CLIENT"	
Type	Private Account <input type="radio"/> Business Account <input type="radio"/>
Full Name (of person or business)	
Identity / Registration number	
Business VAT number (for business accounts only)	
E-mail address	
Mobile number	
Alternative Mobile Number	
Billing address	

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: _____

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



ASAP

OUT OF THIS
WORLD INTERNET
SOLUTIONS

DEBIT ORDER AUTHORITY AND MANDATE

REPRESENTED BY

"BANK ACCOUNT HOLDER'S DETAILS"

Full Name (of person or business)	
Identity / Registration number	
Mobile number	

"BANK ACCOUNT"

Name of Bank		Account number	
Branch name		Branch number	
Account type	Cheque <input type="radio"/>	Savings <input type="radio"/>	"DEBIT DAY OF MONTH"
	Transmission <input type="radio"/>		25 th <input type="checkbox"/>
			Last Business Day <input type="checkbox"/>
		"INTERVAL"	15 th <input type="checkbox"/>
			Monthly

- The CLIENT hereby authorises ASAP to issue and deliver payment instructions to ASAP's banker for collection against the CLIENT's BANK ACCOUNT at the CLIENT's BANK as set out above (or any other bank or branch to which the CLIENT may transfer the CLIENT's account) on condition that the sum of such payment instructions will never exceed the CLIENT's obligations as agreed to in the AGREEMENT.
- 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 the 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.
- If the DEBIT DAY falls on a Saturday, Sunday, or public holiday, the payment instruction will be delivered on the PRECEDING business day.
- The details of each payment instruction shall reflect on the CLIENT's bank statement in the form of the abbreviated name "ASAP" followed by the ACCOUNT NUMBER, to enable both the CLIENT and ASAP to identify the AGREEMENT. The said ACCOUNT NUMBER shall be communicated to the CLIENT before the issuing of any payment instruction.
- ASAP shall provide the CLIENT with a monthly tax invoice and/or statement of account clearly reflecting the AMOUNT, DATE and ACCOUNT NUMBER of the payment instruction to be delivered.
- The CLIENT acknowledges that all payment instructions issued by ASAP shall be treated by the CLIENT's above-mentioned bank as if the instructions had been issued by the CLIENT personally.
- The CLIENT agrees that although this authority and mandate may be cancelled by the CLIENT, such cancellation will not cancel the AGREEMENT. The CLIENT also understands that the CLIENT cannot reclaim amounts which have already been paid from the CLIENT's BANK ACCOUNT in terms of this authority and mandate if such amounts were legally owing to ASAP.
- The 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)

"ASAP ACCOUNT NUMBER"

	(To be completed by ASAP)
--	---------------------------

