

Home Solutions Service Agreement

V21.02



Subscriber Details			
Name		Surname	
ID Number		Date of Birth	
Contact Details			
Mobile Telephone No.		Work Telephone No.	
Email Address		Work Fax No.	
Address Details / Domicilium Citandi et Executandi			
Physical Address		Billing Address	
Postal Code		Postal Code	
Installation Address		Special Instructions for Installation	
Postal Code			
Contact Person		Contact No.	
Package / Service / Term Options:			
Internet Service	☐ 5 Mbps R463.00 pm	☐ 10 Mbps R679.00 pm	☐ 20 Mbps R879.00 pm
	☐ 50Mbps R1079.00 pm	☐ 100 Mbps R1279.00 pm	☐ 200 Mbps R1379.00 pm
Installation Options:			
☐ Free Installation – 24 Month Contract			
☐ R 1115.00 – 12 Month Contract			
☐ R 2229.00 – Month to Month Contract			
☐ Fibre Converter for DSTV – R2958.00			
Consent and Declaration			
I _____ (print name) the undersigned, confirm the accuracy of the information provided in this document and by signing this document, acknowledge that I have read, understand and agree to be bound by the subscriber standard terms and conditions attached hereto. I hereby instruct the Service Provider and or their appointed agent to invoice and collect amounts from the Subscriber			
Bank Debit Order Instruction			
The individual payment instructions so authorised to be issued must be issued and delivered as follows: Monthly; on or after the dates when the obligation in terms of the Agreement is due and the amount of each individual payment instruction may not be more or less than the obligation due. Installation; All costs relating to installation will be debited to your account at end of the month in which the installation was completed.			
Bank		Branch Name	
Account Type	☐ Current ☐ Savings ☐ Transmission	Branch Code	
Account/Card Holder		Account Number	
Card Type	☐ Visa ☐ Mastercard	Card Number	
Card Expiry Date		Card CCV No.	
Debit Date	☐ 1 st ☐ 7 th ☐ 15 th ☐ 27 th	1 st 7 th 27 th	
I / We hereby authorise and mandate you to issue and deliver payment instructions to the bank for collection against my / our above-mentioned account at my / our above-mentioned bank (or any other bank or branch to which I / We may transfer my / our account) which payment shall be made on or before the 30th day of each month commencing on the Effective Date on condition that the sum of such payment instructions will never exceed my / our obligations as agreed to in this Agreement, commencing on the Effective Date and continuing until this Agreement expires. Abbreviated name as registered with the bank: INFRAPLEX Mandate I / We acknowledge that all payment instructions issued by you shall be treated by my/our above-mentioned bank as if the instructions had been issued by me/us personally. Cancellation I / We agree not to cancel this Authority and Mandate. I / We shall not be entitled to any refund of amounts which you have withdrawn while this authority was in force, if such amounts were legally owing to you. Assignment I / We acknowledge that this Agreement, including the aforesaid mandate may be ceded and / or assigned to a third party by the Service Provider.			
Date		Place	
		Signature	
SIGNATURE AS USED FOR SIGNING CHEQUES OR CREDIT CARD VOUCHERS			