**Fibre-to-the-Home Service Request Form**

**Reservoir Hills**

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| --- |
| **Applicant Details** |
| Name and Surname, *or* Company Name, *or* CC Name *or* Trust: |  | ID or Registration Number: |
| **Installation Details** |
| Complex name: |
| Unit no: |  |
| Street name: | Street no: |
| Suburb: |
| E-mail: |
| Home no: | Mobile No: |
| **Installation Contact details**  | As above Yes No |
| Contact Name: |  |
| Mobile Number: |  |
| Alternative Number: |  |

|  |  |  |
| --- | --- | --- |
| **Speed (Mbps)** | **12 Month Contract** | **Month-to-Month** |
| 100/100  | R499  | R599 |
| 500/500 | R799 | R899 |
| 1000/1000 | R999 | R1299 |
| Installation | R1750 | R1750 |

***Note: The above is subject to a monthly debit order***

***The FTTH Fibre Service Packages are all uncapped, unshaped and include a Standard Wi-Fi Device.***

***The term “Pre-paid” refers to the billing cycle. Skylite services must be paid monthly in advance.***

For the avoidance of doubt, kindly note that Month-to-Month contracts will automatically renew after 30 days and 12-Month contracts will automatically renew after 12 months and shall continue indefinitely until such time as a termination notice is placed with Skylite as per the cancellation procedures set out in the Terms and Conditions below.

**☐ Declaration:** I have read, understand and agree to be bound to the Terms and Conditions that accompany this Order Form, available at [***https://gigawave.co.za/GIGAWAVE%20STANDARD%20TERMS%20AND%20CONDITIONS.pdf***](https://gigawave.co.za/GIGAWAVE%20STANDARD%20TERMS%20AND%20CONDITIONS.pdf) ***.*** I declare that the information given above is true and correct.

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DEBIT ORDER MANDATE FORM

# Authority and Mandate for Payments Instructions: Electronic and Written Mandates

Given by (name of account holder)

Address

Bank

Branch and Code

Account Number

Type of account (circle applicable) Current/Cheque/Savings/Transmission Amount

Date

Contact full name

Contact phone number

Abbreviated name as registered with your bank

This signed Authority and Mandate refers to our contract dated (“the Agreement”). I/We hereby authorize you to issue and deliver payment instructions to your Banker for collection against my/our abovementioned account at my/our above-mentioned Bank (or any other bank or branch to which I/we may transfer my/our account) on condition that the sum of such payment instructions will never exceed my/our obligations as agreed to in the Agreement and commencing on and continuing until this Authority and Mandate is terminated by me/us by giving you notice in writing of not less than 25 ordinary working days, and sent to general@skylite.co

The individual payment instructions so authorized to be issued must be issued and delivered monthly. In the event that the payment day falls on a Sunday, or recognized South African public holiday, the payment day will automatically be the preceding ordinary business day.

Payment Instructions due, may be debited against my account on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (options 25th or the last day of the month insert that which is applicable)

I / We understand that the withdrawals hereby authorized will be processed through a computerized system provided by the South African Banks and I also understand that details of each withdrawal will be printed on my bank statement. Each transaction will contain a number, which must be included in the said payment instruction and if provided to you should enable you to identify the Agreement. A payment reference is added to this form before the issuing of any payment instruction.

# Mandate

I/We acknowledge that all payment instructions issued by you shall be treated by my/our above- mentioned Bank as if the instructions have been issued by me/us personally.

# Cancellation

I/We agree that although this Authority and Mandate may be cancelled by me/us, such cancellation will not cancel the Agreement. 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 Authority may be ceded or assigned to a third party if the Agreement is also ceded or assigned to that third party, but in the absence of such assignment of the Agreement, this Authority and Mandate cannot be assigned to any third party

Signed at on this day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature as used for operating on the account)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Assisted by Skylite representative - office use only)

Agreement reference number is (Office use only)

Once completed kindly email your application form to general@skylite.co