

FORM 7: APPLICATION FOR NEW TELEPHONE LINE/CHANGE OF EXISTING LINE OR PRODUCT



Existing Telephone Number: _____

Title: _____

Initials: _____

Identity Number or Business Registration Number: _____

Contact Number: _____

INSTALLMENT ADDRESS

Perseel/Premises: **BLOEM SHOW 2010 • SHOWGROUNDS, CURIE AVENUE**

Stand Number: _____

Town or City: **BLOEMFONTEIN**Existing Telephone Number (if known): **051-448 9894/5**

POSTAL ADDRESS

PO Box Number: _____

Town or City: _____ Code _____

FORWARDING ADDRESS

Street Name: _____

Street Number or PO Box Number: _____

Town or City: _____ Code _____

SERVICE REQUIRED

New Telephone Service Connection: R**Termination** of Telephone Service: R**Transfer** of Telephone Service to **new premises**: R**RTransfer** of Telephone Service on **same premises**: R**Transfer** of Telephone Service on **same premises**: R**Transfer** to another person: R**Other** - Not Specified RSupply **Indoor Extension** RSupply **Jack (plug)**: **Activate** existing **Jack** (New Service): RSpecified **Call Information** R***All prices do not include VAT****PAYMENT DATE OF ACCOUNT:** _____ **Day of each month****TALK PLUS** **Call Answer** **Identi Call** **Forward Call** **Call Waiting****Conference Call** **Direct a Call** **Speed Call** **Urgent Call** **Block Call** R**R Call** R**Fax Answer** RDo you require a free telephone guide subscription? YesNo ***All prices do not include VAT**Date service is required: **2 0** / /Signature of applicant: **2 0** / /

Client Number: _____

Order Number: _____

COMPLETE FORM AND RETURN TO: FAX: 041-407 9015**CONTACT PERSON: HENNIE FYVER: 082 415 2080**