

FIXED SERVICE TERMINATION REQUEST FORM**Customer Details**

Customer Name.....
 Physical Address (Equipment Site).....
 City/Town.....
 E-mail Address.....Contact Phone No.....

ACCOUNT DETAILS

Circuit Identifier (Eg.9501234)	Account No. (Eg.1-123456789)	Access Media (Specify Fiber,Wimax,Microwave)	Bandwidth (Eg.5Mbps)

Effective date for termination (DD/MM/YY).....

Reasons for Termination

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Deposit Refund details:

Have outstanding bills on the account been settled?.....

- Transfer via M-PESA to mobile no:.....
 M-PESA Registered Name.....
- Apply to clear outstanding amount on Account No:.....
- Refunds via EFT (Electronic Fund Transfer).....
 Bank Name..... Branch.....A/C No.....
 A/C Name.....
- Hold the deposit to activate another Fixed account.....
 Deposit A/C No..... Account payment

CUSTOMER DECLARATION

I/We understand that my/our instructions will be effected by Safaricom and that Safaricom reserves the right to recover any outstanding charges including subscription charges from the deposit held by Safaricom, or recover the same directly from me/us if there insufficient funds held as deposit.

Applicant Name.....Signature.....Date.....
 Company Stamp