



## SERVICE ORDER FORM

Between

Opix (Pty) Ltd (Registration number: 2017/275548/07), Unit 10 Oxford Office Park, Highveld, Centurion, 0169 (Domicilium citandi et executandi) (hereinafter referred to as OPIX)  
And

Company Name	_____	Trading as	_____
Company Registration Number	_____	VAT Registration Number	_____
Company Telephone Number	_____		
Company Physical address	_____		
Company Postal address	_____		

### CONTACT DETAILS

#### Technical Person Contact Information

Name & Surname	_____
Landline Number	_____
Cellphone Number	_____
Email address	_____

#### Accounts Person Contact Information

Name & Surname	_____
Landline Number	_____
Cellphone Number	_____
Email address	_____

### BANK DEBIT ORDER AUTHORIZATION

Bank Name	_____	Branch	_____
Branch Code	_____	Name of account holder	_____
Account Number	_____	Type of account	_____
<b>Signature of Account Holder</b>	_____	Agreement Reference #	_____

Abbreviated name as registered with the bank: Opix

This signed Authority and Mandate refers to our contract as dated as on signature hereof ("the Agreement"). I / We hereby authorise you to issue and deliver payment instructions to the bank 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 the commencement date and continuing until this Authority and Mandate is terminated by me / us by giving you notice in writing of no less than 20 ordinary working days, and sent by prepaid registered post or delivered to your address indicated above.

On the 25<sup>th</sup> day ("payment day") of each and every month commencing on the contract signed date. In the event that the payment day falls on a Saturday, Sunday or recognized South African public holiday, the payment day will automatically be the very next ordinary business day. Further, if there are insufficient funds in the nominated account to meet the obligation, you are entitled to track my account and re-present the instruction for payment as soon as sufficient funds are available in my account.

I / We understand that the withdrawals hereby authorised 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. 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. I/we agree to pay any banking charges relating to this debit order instruction.

I/We consent and give permission to Opix to send any invoices and statements electronically in lieu of a paper copy and agree to receive such documentation via e-mail. By agreeing as aforesaid no statements will be sent through postal mail. Should the e-mail be undeliverable you will be contacted telephonically to verify the address, and the documentation will be sent you via post. Should you wish to receive your statements through postal mail or should you be unable to access your electronic statement you must notify Opix via e-mail at [accounts@opix.co.za](mailto:accounts@opix.co.za)

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. Abbreviated name that will appear on your bank statement: Opix.

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 to 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.

### AGREEMENT

I, the undersigned, declare, agree and confirm that:

- 1.1 If acting in a representative capacity that I am duly and fully authorised to do so. I personally hereby indemnify and hold Opix harmless for any damages suffered by it, should it at any stage appear that I'm not so authorised.
- 1.2 The information supplied herein with regard to me is complete, true and correct as at date of signature/electronic processing hereof.
- 1.3 Electronic processing of the transaction (telephonically or via internet portal) will be binding on me as if I have signed a physical application form, upon: a. my agreement via tick box and submission of the online application form; or b. my verbal confirmation of the existence of the agreement during the telephonic application process. I am bound to the terms and conditions applicable to the transaction, including but not limited to:
  - 1.3.1 Opix's standard terms and conditions for the provision of electronic communication services and products (fixed-line services and products), available at [www.opix.co.za](http://www.opix.co.za); and/or
  - 1.3.2 Product-specific terms and conditions related to the service and/or product I have applied for; as indicated on any promotional material and/or on ICT's website [www.Opix.com](http://www.Opix.com) and/or communicated to me telephonically during a telephonic application process.
- 1.4 By signing this agreement, I declare myself familiar with and bound to the content of said terms and conditions.
- 1.5 I hereby consent to Opix credit-vetting this application

Thus done and signed at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Signature

Name & Surname



## ANNEXURE A

### MONTHLY SERVICES REQUIRED

QUANTITY	ITEM CODE	SERVICE DESCRIPTION	NEW / UPGRADE SERVICE	CONTRACT TERM	MONTHLY RECURRING COST	NON RECURRING COST
					R	R
					R	R
					R	R
					R	R
					R	R
					R	R
TOTAL (Excl)					R	R
VAT					R	R
GRAND TOTAL (Incl)					R	R

### CONNECTIVITY INFORMATION

Installation address where connectivity service should be installed:

On-site Contact Person Name: \_\_\_\_\_

Landline Number: \_\_\_\_\_

Cellphone number: \_\_\_\_\_

GPS co-ordinates: \_\_\_\_\_

#### VOICE DSL SERVICES:

New Line: Yes ☐ No ☐

Telkom Line number to convert to Voice DSL: \_\_\_\_\_

#### UPGRADE SERVICES:

Existing circuit number to be upgraded \_\_\_\_\_

#### ADDITIONAL NOTES/COMMENTS
