

Order Form

FILE by FIFO — Subscription Agreement

Complete this form to activate your File by FIFO subscription

Client Information

Company Details

Field	Details
Registered Company Name	_____
Trading Name (if different)	_____
Company Registration No.	_____
VAT Number (if applicable)	_____

Billing Address

Field	Details
Street Address	_____
City	_____
Province	_____
Postal Code	_____

Primary Contact

Field	Details
Full Name	_____
Position/Title	_____
Email	_____
Phone	_____

Subscription Details

Selected Plan

Field	Details
Number of Employees	_____
Selected Tier	_____

Pricing

Item	Amount
Annual Subscription Fee	R _____
One-Time Setup Fee	R _____
TOTAL	R _____

Payment Schedule

Option	Tick
Annual payment (single invoice)	[]
Monthly payment	[]

Preferred Start Date

Field	Details
Requested Start Date	_____

Payment Method

Method	Tick	Details
Bank Transfer (EFT)	[]	Invoice will be sent via email
Credit Card	[]	Payment link will be sent
Debit Order	[]	Complete mandate form separately

Terms and Conditions

By signing this Order Form, the Client agrees to:

- Service Terms:** The subscription is governed by the File by FIFO Terms of Service available at file fifo systems/terms
- Payment:** Payment is due within 7 days of invoice. Late payment may result in service suspension.
- Data:** Client data remains the property of the Client. FIFO processes data in accordance with POPIA requirements.
- Cancellation:** Subscriptions may be cancelled with 30 days written notice. Setup fees are non-refundable.
- Tier Changes:** If employee count exceeds the subscribed tier, Client agrees to upgrade to the appropriate tier.
- Support:** Email support is included. Response within 24 hours on business days.

Authorisation

Client Signature

I am authorised to enter into this agreement on behalf of the above company.

Field	Details
Full Name	_____
Position	_____
Signature	_____
Date	_____

FIFO Representative

Field	Details
Full Name	_____
Signature	_____
Date	_____

What Happens Next

1. **Invoice Sent** — Within 24 hours of receiving this form
2. **Payment Received** — Account activated within 1 business day
3. **Setup Call Scheduled** — We'll contact you to arrange setup
4. **Go Live** — Typically within 3-5 business days of payment

Internal Use Only

Field	Details
Order Number	FIFO-ORD-_____
Sales Rep	_____
Referral Source	_____
Invoice Sent Date	_____
Payment Received Date	_____

Return completed form to: support@fifo.systems

Questions? Contact support@fifo.systems

File by FIFO — Protecting South African businesses since 2024

FIFO Technologies (Pty) Ltd | file fifo.systems