

Order Form



Business Name: _____
 Contact Person: _____
 Postal Addr: _____

 Physical Addr: _____

Cell: _____
 Phone: _____
 Fax: _____
 Contact email: _____
 Accounts email: _____

Web Design

Logo _____ R _____
 Content _____ R _____
 Media Pack _____ R _____
 Skinning _____ R _____

Hosting and E-Mail

Domain _____ R _____
 Package

| | | |
|-----------------|---------------|-------------------|
| Bronze R 114 | Gold R 228 | Platinum R 342 |
|-----------------|---------------|-------------------|

 _____ R _____

Advertising

Polokwane Info Premium Listing _____ R 128
 Category Add _____ R 458

DSL Internet

4Mb p/s Business Unshaped DSL Internet R 298 (Bundled Discount) R 199 R _____

 Authorised Signature

 Date

We reserve the right to terminate all/ any services without prior notice should your payment lapse and go into arrears by more than 3 payments in a twelve month period.

Bank Details:
 Newtford t/a Key
 Standard Bank Polo
 Acc No. 7387
 Branch No. 052548

I understand & agree to the Standard Terms & Conditions. Monthly Subscriptions are payable in advance via attached Debit Order. Design, domain and advertising fees escalate annually at or above the inflation rate. Pricing subject to change without prior notice.



CK 2004/127438/23
 VAT No. 4620217861
 84 Schoeman Str. Polokwane, 0699
 Tel: +27 15 297 1373
 Fax: +27 86500066
 www.polokwane.info

BANK DEBIT ORDER INSTRUCTION / CREDIT CARD AUTHORITY

| | | | |
|--------------|-------|--|---------|
| Name : | _____ | Date : | _____ |
| Address : | _____ | Contract No. : | _____ |
| | _____ | Debit Amount : | _____ |
| | _____ | Commencement Date : | _____ |
| Contact No : | _____ | Abbreviated name as registered with the bank : | KEYINFO |

The DETAILS OF MY/OUR ACCOUNT ARE AS FOLLOWS:

| | | | |
|-------------|-------|--|-------|
| Bank : | _____ | Branch Town : | _____ |
| Branch No: | _____ | Account Name. : | _____ |
| Account No: | _____ | Type of A/C : (savings,current, transmission) | _____ |

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.

The individual payment instructions or any variable amount pertaining to this agreement as it may vary from time to time due to additional purchases, escalations, or arrears so authorised to be issued must be issued and delivered as follows :



On the 7th or 29th (or third last working day), "payment day", of each and every month commencing on _____. 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.

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.

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. This authority may be cancelled by means of giving Newton IT t/a Polokwane Info thirty days (30) written notice via email to accounts@keyinfo.co.za. In the event of the Debit Order being returned for a third consecutive month, our Service will be Terminated with immediate effect. Refer to our Website: www.polokwane.info for Terms & Conditions.

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.

Signed at _____ on this _____ day of _____ 20__

Name _____

Signature _____