Order Ref. No: _____

School Fibre Broadband Services – Change of Service Form (CABD)

Account no. _____ VCN no: _____ Order no: _____

Contract Ref: _____ Requested Service Date _____

Please fill out the form in English and fax to 3167 1460/ 2123-9922. Please ✔ where appropriate

School/Organization Information		
School/Organization Name		
Broadband Installation / Relocation Address		
School/Organization Correspondence/Billing Address (if different from above address)		
Contact Person's Name (in English)		Title / Position
Contact Tel. No.	Fax No.	E-mail Address (mandatory 必須填寫)

Customer Request

[ ] Contract Renewal
Bandwidth: _____ MB Monthly fee: $_____ Contract period: _____ mths

[ ]upgrade From _____MB to _____MB (Fm _____ to _____)

[ ]downgrade From _____MB to _____MB

[ ] Add IP address Add _____ IP(s) charge: $300 per IP x ____ IP(s)
(charge code: SCHIPA____)

[ ] Temporary upgrade bandwidth From _____ Mbps to _____ Mbps charge: $_____
(charge code: SCHTU)

[ ] Temporary Downgrade bandwidth From _____ Mbps to _____ Mbps

[ ] Check Record (please specify): _____

[ ] Termination - [ ] Broadband VCN No: _____
[ ] Others: _____

[ ] Change Account Information

_____

[ ] Others / Remarks (please specify): _____

School Authorized Signature: X	School Stamp:	Date:

For official use only

Pls ✓	Product code	Service type code	Bandwidth	Price plan code	Contract plan code
	SCHCORP	SCH	MB	SCH	SCH MTH
	DIACORP	SCH	MB	SCHDB	SCH MTH
	DITCORP	SCH	MB	SCHDB	SCH MTH
	10MCORP	BB	MB	SCHBB	BB MTH
	100MCORP	BB	MB	SCHBB	BB MTH
	MNETBW2MCORP	MNET	MB	SCHME	MNET MTH
	MNETBW10MCORP	MNET	MB	SCHME	MNET MTH

Old price plan code:	B. case no:	Salesman code:	Signature