



ACN: 100 728 158 ABN: 11 100 728 158

a: Suite 4, 9 Wilson Street, Berwick VIC 3806 p: 1300 223 266 f: 1300 304 672 e: sales@acecommunications.com.au w: www.acecommunications.com.au

ACE MOBILE BROADBAND APPLICATION FORM & AGREEMENT

Account Details

Account Holder

Surname:		Given Name:	
Business Name (if applicable):		ABN (if applicable):	
Phone:		Mobile:	
Fax:	Email:	Date of Birth:	

Primary Address

Address:		
Suburb:	State:	Postcode:

Billing Details (if different from above)

Address:		
Suburb:	State:	Postcode:
Accounts Payable Contact:	Phone:	Email:

Service Details

✓	Product	Fees (GST Inclusive)	Amount to be Billed
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Plan Selection

<input type="checkbox"/> 1GB - \$24.95* <input type="checkbox"/> 4GB - \$39.95* <input type="checkbox"/> 7GB - \$59.95* <i>* Excess usage charged at 15c per Megabyte</i>	\$ _____ per calendar month	
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Hardware

<input type="checkbox"/> USB Modem (\$149 on 12 month contract or \$0 on 24 month contract)	\$ _____ (once off)	
<input type="checkbox"/> External Aerial	\$69 (once off)	
Delivery Fee - \$18.50 Australia Wide	\$18.50	
Other (please specify):		

Hardware is to be delivered to:
 Primary Address
 Billing Address
 Dealer

Other

Comments/Notes:	TOTAL: _____
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Payment Options

Direct Debit from a Credit Card

I/We wish to use the Card specified below to pay for the goods/services supplied to me/us by Ace Communications Group Pty Ltd. I/We authorise Ace Communications Group Pty Ltd to debit my/our Card with the amount indicated and for any ongoing charges for my/our usage of the indicated products/services. This authority will stand, in respect of the below specified Card and in respect of any Card issued to me in renewal or replacement thereof, until my/our services are terminated in writing in accordance with Ace Communications Group Pty Ltd account Terms and Conditions.

VISA MasterCard

(Please note: CCV Number is the last 3 digits on back of card)

Card Number:																					CCV Number:			
Expiry Date:	/	Card Holder Name:																						
Cardholder Signature:										Drivers License/ID Number and State:														

Please initial here:



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Payment Options (continued)

Direct Debit from a Bank Account

Please complete direct debit request on following page.

Cheque/EFT *(This payment option is only available to companies with an ABN)*

I/We wish to pay the amount indicated and any ongoing charges for my/our usage of the indicated products/services by company cheque/EFT. I/We understand that ongoing charges are invoiced one full month in advance of the service period and are payable 14 days from date of invoice. I/We agree to pay within these terms.

Initial Payment Amount: \$ Cheque/Receipt No: Enclosed / Sent Separately / EFT

Declaration & Authorisation

I hereby declare that I am an authorised representative of the above mentioned business (if applicable). I confirm that the details supplied above are true and correct and authorise Ace Communications Group Pty Ltd to process this application for the products/services indicated. I acknowledge that I have been made aware of, read, understand and agree to be bound by the Terms and Conditions, and the following conditions relating specifically to the above products/services.

- Term of contract is 12 or 24 months (commencing from date of activation), as indicated in Connection Fee section above.
- Services require 30 days written cancellation at all times. If the service is cancelled prior to the completion of the contract, the full value of the remainder of the contract is payable by the account holder (number of months multiplied by the monthly service fee).
- Any connection fee and any installation/hardware/software fees are payable at the time of application. Applications will not be processed until payment is received. Should the service not be commissioned, this amount will be refunded in the form of an electronic transfer to a nominated account.
- Tax invoices or receipts (where applicable) will be delivered by email to the email address indicated under "Accounts Payable Contact" or if this has not been supplied, to the "Account Holder" email address. The customer remains solely responsible for advising Ace Communications Group Pty Ltd should their contact email address change at any time.
- If we are unsuccessful in processing a direct debit payment, Ace reserves the right to suspend and/or cancel the service until payment is received. Reconnection/reactivation fees may apply.
- Customers paying by direct debit from a credit card or bank account remain solely responsible for advising Ace Communications Group Pty Ltd should their credit card or bank account details change at any time.
- Data usage is calculated on downloads and uploads.
- Data downgrades are not permitted at any time during the contact period.
- Plan change requests must be lodged at least 7 days prior to the 1st of the following month for the change to begin in that month. If a customer chooses to upgrade their Ace Mobile Broadband plan whilst under contract the service cannot be downgraded to a lower plan for the duration of the contract period.
- An email address will only be provided if requested by customer.
- You must have Microsoft Windows 2000, Windows XP or Microsoft Vista operating system to connect to the service. Limited Macintosh OS support is available.
- Ace Mobile Broadband is provided as a Best Effort service and actual speed will be determined by a number of factors including location, Internet traffic, your hardware and software and source of download.
- Due to the technical nature of Ace Mobile Broadband we cannot guarantee your voice quality when using Ace Mobile Broadband and VoIP. Ace VoIP combined with Ace Mobile Broadband is provided as a best effort service and actual voice quality will be determined by a number of factors including location, Internet traffic, your hardware and software.
- Any SMS messages sent from the mobile broadband software will be charged at 28c per message (a message is defined as 156 characters).
- Only one simultaneous login is allowed.
- All prices are GST inclusive.

Full Name:

Signature:

Date:

Dealer Details

Name:

Contact No:

Office Use Only

Application Lodged:

ECD:

Activated:

Billing Commences:

Entered:

Hardware Ordered/In Stock:

Hardware Despatched:

This form is to be completed only by customers who wish to have their charges direct debited from their bank account.

***** DO NOT complete this form if credit card details have been provided on previous page.*****



Direct Debit Request – New Customer Form

Office Use Only

Customer Ref:

Surname or Company/Business Name:		Given Name:	
Address:		Suburb:	
Postcode:	Phone: (H) ()	(W) ()	(M)

Payment Details

I/We wish to pay for the goods/services supplied to me/us by Ace Communications Group Pty Ltd by Direct Debit from the below bank account. I/We authorise Ace Communications Group Pty Ltd to debit my/our account with the amount indicated on the previous page/s and for any ongoing charges for my/our usage of the indicated products/services. This authority will stand, in respect of the below specified account, until my/our services are terminated in writing in accordance with Ace Communications Group Pty Ltd account Terms and Conditions.

Ezi Debit From Bank Or Cheque Account, Building Society or Credit Union

Financial Institution:		Branch:	
BSB Number:	-	Account Number:	
Account Name:			

(Please note: Direct Debit is not available on all bank accounts – if in doubt please refer to your financial institution)

Terms and Conditions

I/We hereby authorize Ezi Debit Australia Pty Ltd to make periodic withdrawals from the financial institution specified above on behalf of the business as described above. (Hereafter referred to as “the business”) The administration of this agreement is conducted by Ezi Debit Australia acting as billing agent for the Business. The services provided by Ezi Debit Australia are administrative to the status of the Agreement and do not extend to the provision of any services or benefits of the Agreement as provided by the Business. This authority shall be interpreted and enforced pursuant to the laws of the state of Queensland. I/We request until further notice in writing to direct debit my/our account described above, any amounts which Ezi Debit Australia, **User ID number 165969**, may debit or charge me / us through the Ezi Debit system.

1. The Financial Institution may, in its absolute discretion, determine the order of priority of payments by it if any monies pursuant to this request or any other authority or mandate.
2. The Financial Institution may, in its absolute discretion, at any time by notice in writing to me / us terminate this request as to future debits.
3. The user may, by prior arrangement and advice to me / us vary the amount or frequency of future debits.
4. You are advised to verify account details against a recent bank statement and if uncertain you should contact your financial institution.
5. It is your responsibility to ensure that you have sufficient clear funds in your nominated account to enable the direct debit to be honoured by your financial institution. Direct debits normally occur overnight; however transactions can take up to three (3) days depending on your financial institution.
6. Any dispute arising from this or subsequent direct debits will be in the first instance directed to the business or Ezi Debit Australia. If no resolution is forthcoming you are advised to contact your financial institution.
7. We will keep your information about your nominated account at the financial institution private and confidential unless this information is required to investigate a claim made in it relating to an alleged incorrect or wrongful debt, or otherwise required by law.
8. I/We authorise the Debit User to verify the details of the abovementioned account with my/our Financial Institution.
9. I/We authorise the Financial Institution to release information allowing the Debit User to verify the above mentioned account details.

This authority is to remain in force in accordance with the terms and conditions as described on this page, and I/we have read and understand the same.

Signature of Account Holder:	Date:
Signature of Joint Account Holder (if applicable):	Date:

Office Use: Staff Members Name:	Ezi Debit Office Use Only
Date Received:	Entered By: Reference #: