

TRANSFER AUTHORITY FORM

Change of Ownership





smb.salesquery@Vocus.com.au

Both parties should review this form and read all terms and conditions before signing. Please ensure that all information supplied is correct. Incorrect information may cause delays in the processing of your application. Depending on the nature of the application, processing times will vary.

On completion this form should be scanned and emailed to: smb.salesquery@vocus.com.au The transfer will only become effective when Vocus processes the transfer. If you have any questions about the transfer please feel free to contact us on 132 777.

PART 1: CUSTOMER DETAILS - OUTGOING CUSTOMER					
Legal Entity:	Vocus Account Number:				
Trading Name:	ABN/ACN:				
Contact Name:	Position:	Telephone:			
I am the Authorised representative of this account	Are you a Capricorn Customer? Yes No	Capricorn Member Number:			
PART 2: TRANSFERRING SERVICES					
Full Transfer		e confirm the status of the remaining services. emain liable and cancellation fees may apply.)			
SERVICE TYPES REQUIRED (Tick all applicable services)					
Cloud	Midband Ethernet	IPV Products			
Fixed Line Internet	VPN				
Do you want to transfer a Phone System? Yes No	Is this phone system currently provided under a final Yes No	ince contract?			
	If your phone system is under a finance contract and complete the "Vocus Finance Application for Novati				
Have you attached the "Vocus Finance Application for Novation of an Existing Agreement"?	Are you a Capricorn Customer?	Capricorn Member Number:			
Yes No	Yes No				
TRANSFER DATE Transfer date relates to all services list in Part 2a - Services to be transferred. The transfer date can not be earlier than 10 working days from the date that this form is submitted to Vocus including all required information. Vocus will attempt to transfer the services on the date you have requested. However some requests may take longer to complete.					
Requested Transfer Date:					

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PART 2A: SERVICES TO BE TRANSFERRED









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It is a le	egal r	equire	ment	that	all se	ervice	s be	listed	d individually.				
Service ID: (CPE, Contract Numbers, Service Numbers & ID's)							s & ID's)	Product Type	Plan Name	Remaining Contract Term	Remaining Minimum Contract Amount	Minimum Monthly Access Fee
As the service	autho s liste	orised ed abo	repre	senta Part 2	ative i 2a su	for th bject	ie Inc	omir ie de	ng Customer I acknov claration made in Par	vledge that Incoming (t 7.	Customer will be	taking ownershi	p of the
Incoming Customer Signature:			Date:										
Full Name	Full Name (please print):				Position:								
As the street	autho vices	orised listed	repre abov	senta e in P	ative t	for th	ie Ou ject t	tgoir to the	ng Customer I acknow e declaration made in	vledge that Outgoing (Part 6.	Customer will be	transferring owr	nership of
Outgoing (Custome	er Signatı	ure:							Date:			
Full Name (please print):						Position:							

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PART 3: CUSTOMER DETAILS - INCOMING CUSTOMER							
New Customer	Existing Customer	Account Number:					
NB: The below information is not	required for existing customers.						
Legal Entity and corresponding ABN / ACN:							
Street Address:		Suburb:	State/Territory:	Postcode:			
Primary Contact Name:		Primary Contact Position:	Tel:	Fax:			
Email (used for Service Notifications, Marketing M	aterial):	Password (Mandatory):					
IT Technician name:		Email: Telephone (Fixed & Mobile):					
To be completed by Partnership, Sole Trader, Individual Only							
Driver's License No:		State of issue (Driver's License):	Date of Birth:	Years trading:			
Residential Address:		Suburb:	State/Territory:	Postcode:			
Years at Residential Address:							
PART 4: NOMINATED REPRESENTATIVE							
Please use the section below if yo	u would like to nominate represent	tatives who can access your accour	nt.				
Name of representative 1 (full name including title):	Signature of representative 1:	Date:				
Name of representative 2 (full name including title	e):	Signature of representative 2:	Date:				
I authorise the nominated individual/s above to have the following access level on the account; Full authority to request additional services / cancel existing services (these changes may incur charges that you accept) Make enquiries on the account (e.g. request current bill information, general account detail)							
PART 5: BILLING DETAILS							
Billing Options:	Email (Default)	Paper (\$2.95 monthly sur	charge applies to paper bil	lling)			
Bill Summary - Tick to receive a summarised bill only Itemised Billing - Tick to receive your bills with more detailed service itemisation (at no additional cost)							
	Direct Debit Payment - Tick to indicate that (you must also complete and attach the Direct Co	payment will be made via Direct Debit ect Debit Request form)					
Billing Address (if different from site address above	e):	Suburb:	State/Territory:	Postcode:			
Billing Contact name:		Position:	Billing Email:				
Billing Telephone (Fixed):		Billing Fax:					

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PART 6: APPLICATION DECLARATION - OUTGOING CUSTOMER

TERMS AND CONDITIONS

For or on behalf of the Outgoing Customer, I request that Vocus transfer the legal responsibility for the services listed above to the Incoming Customer whose details are included in part 3 of this form and I acknowledge that;

The Outgoing Customer will remain liable for the services listed above (including for all debts) prior to the date of transfer or for services not transferred (and any applicable early termination charges which may arise should the service be cancelled prior to the expiry of its fixed or minimum term).

Vocus's acceptance of this request for transfer is subject to Vocus's ordinary credit approval process and otherwise at Vocus's discretion. I have read and understand all statements made in the application form and agree that the recipients of the email address(es) associated with my services will not receive emails which are sent to those email address(es) including emails which may be intended for the Outgoing Customer. I agree to take all necessary steps to ensure that the Outgoing Customer's contacts are notified of new contact details.

I agree that I the Outgoing Customer will not seek to recover any loss I the Outgoing Customer has suffered or may suffer (either directly) as a result of this transfer.

I warrant that I am authorised to make this request on behalf of the Outgoing Customer

Signature:	Date:
Full Name (please print):	Position:

PART 7: APPLICATION DECLARATION - INCOMING CUSTOMER

TERMS AND CONDITIONS

I acknowledge that prior to agreeing to receive ownership of the above services, I have satisfied myself of the details of the services including pricing and plan information. I agree that if services cannot be retained on the same plan because the plan is no longer available, services will be transferred to a comparable plan at the then standard pricing for that plan. To discuss your pricing options after the transfer has taken place please contact Vocus on 132 777. The services listed on the transfer authority form will be transferred along with any additional products attached to those services. I agree to my email address and my personal information being used for the delivery of invoices, notifications and marketing material from Vocus, its related bodies corporate and its affiliates, dealers and distributors.

On behalf of the Incoming Customer, I request Vocus transfers the legal responsibility of the services listed above from the Outgoing Customer, whose details appear in part 1 of this form to the Incoming Customer. I acknowledge and agree that the Incoming Customer will be liable for all debts incurred on the services listed above from the date of transfer.

I agree that if Vocus accepts this request, the above services will be provided by Vocus to the Incoming Customer, in accordance with its standard terms and conditions.

I agree to Vocus obtaining from a credit reporting agency a report containing personal credit information in relation to personal or commercial credit provided by Vocus, or otherwise as set out in the Vocus Standard Form of Agreement. Note: As a new account holder the Incoming Customer will be subject to the same contract terms and conditions of the current holder. A processing fee of \$59.00 inc GST for PSTN and ISDN2, \$110 or \$220 for ISDN 40/50/60 will be added to the Incoming Customer's new account. I understand and agree that Vocus may invoice the Incoming Customer for fees and charges equivalent to those fees and charges imposed on Vocus by its suppliers in connection with the transfer.

The Standard Form of Agreement can be found at www.vocus.com.au/help-and-support/legal-contracts for the services being transferred to me. I acknowledge that I have read, understood and agree to the obligations of the Incoming Customer set out in the Standard Form of Agreement. I agree that the Incoming Customer will not seek to recover any loss the Incoming Customer may have suffered (either directly or indirectly) as a result of the transfer.

I warrant that I am authorised to make this request on behalf of the Incoming Customer

Signature:	Date:
Full Name (please print):	Position: