

Service enquiries 1300 009 433

Fax 1300 885 197

www.widelinx.com.au

info@widelinx.com.au

Widelinx®

Suite 1

3 Southern Cross Circuit

Urangan QLD 4655



## Wireless Broadband Residential Application Form - Customer Details

Customer Name					DOB / /	
Business Name (if applicable)						
Customer service connection address						
Suburb		State			QLD	Postcode
Current Email Address:						
Customer phone				Mobile		
Drivers Lic./Medicare No./ ABN						
Email Address (All invoices will be sent to this address)						

## Wireless Broadband Residential Plans

	Plan Name	Speed	Download Limit	Excess Usage Charge	Monthly Charge
<input type="checkbox"/>	Light	512Kbps/512Kbps	1 GB	10c per MB	\$ 29.95
<input type="checkbox"/>	Intermediate	512Kbps/512Kbps	5 GB	10c per MB	\$ 44.95
<input type="checkbox"/>	Superior	1536Kbps/1536Kbps	Unlimited	*Shaped	\$ 74.95

\*Speed slows to 64Kbps once 8 GB data has been reached.

All plans include 1 e-mail address

Visit website for full details and Terms and Conditions

## Equipment & Connection

<input checked="" type="checkbox"/>	Installation Fee	\$299.00
<input checked="" type="checkbox"/>	Wireless Transceiver	\$899.00

## Email Addresses

Please list your preferred supplied email address	@widelinx.net.au
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## Contract Options

<input type="checkbox"/>	Standard 12 month contract
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## Other Fees and Charges that may apply

Dishonour Fee	\$ 9.90
Late Payment Fee	\$ 5.50
Deactivation Fee	\$99.00
Restriction Reconnection Fee	\$22.00
Postal Service Fee	\$ 6.60
Service Investigation Fee	\$33.00
Change Direct Debit Date Fee	\$ 9.90
Emergency Cancellation of Direct Debit Fee	\$11.00

Minimum contract period is 12 months. Minimum commitment on the Light plan is \$1,557.40. All prices are inclusive of GST.

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## Bank Details

I/we authorise IP Systems Pty Ltd, user ID 223038 to debit my/our account with any outstanding money held with the Financial Institution identified below.

Please select ONE option

Credit Card		Direct Debit (from bank account)	
<input type="checkbox"/> Visa Card	<input type="checkbox"/> MasterCard	Name of Financial Institution	
Name on Credit Card		Account Name	
Credit Card Number		BSB No. (6 digits)	
Expiry Date		Account Number	
Cardholder / Account Holder's Signature	.....		

**Direct Debit Processing Date: 21<sup>st</sup> of each month**

Debiting will commence in the month following service activation

## Acceptance of Terms and Conditions

I acknowledge that the terms and conditions governing the arrangements with Widelinx are set out in the Widelinx Residential Broadband Terms & Conditions document.

I understand that my first billing statement may be higher than normal and may include partial billing for the current Month and complete billing for the next month.

If I am a tenant, I agree to obtain the approval of the landlord for the installation.

I agree that all information provided in this **Wireless Application Form** is true and correct.

Customer's Signature .....

Date / /

Please tick this box if you do not wish to receive any further marketing material or correspondence relating to new or improved products and services.

For more information visit [www.widelinx.com.au](http://www.widelinx.com.au) or call 1300 009 433

Office Use only
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