

Contract Term: Month-to-month for Sim Only packages and 24 months for Sim + Router packages
 Once-Off Charge: R99.00 (sim and activation fee)
 Installation Lead Time: Estimated at 3 - 5 working days after your order is captured successfully

SELECT YOUR SIM ONLY PACKAGE

Deal ID	Telkom LTE Package	Hardware	Monthly Price	Selection
DSF2204005	80GB (40GB Anytime Data + 40GB Night Surfer Data)	Sim Only	R149.00	
DSF2204007	160GB (80GB Anytime Data + 80GB Night Surfer Data)	Sim Only	R199.00	
DSF2204009	240GB (120GB Anytime Data + 120GB Night Surfer Data)	Sim Only	R249.00	
DSF2204011	360GB (180GB Anytime Data + 180GB Night Surfer Data)	Sim Only	R349.00	
DSF2204013	2TB (2TB Anytime Data)	Sim Only	R699.00	
DSF2204015	Uncapped Data - All Hours 10Mbps	Sim Only	R449.00	
DSF2204016	Uncapped Data - All Hours 20Mbps	Sim Only	R599.00	

SELECT YOUR SIM + ROUTER PACKAGE

Deal ID	Telkom LTE Package	Hardware	Monthly Price	Selection
DSF2309035	80GB (40GB Anytime Data + 40GB Night Surfer Data)	D-Link G413K Wifi Router	R209.00	
DSF2309037	160GB (80GB Anytime Data + 80GB Night Surfer Data)	D-Link G413K Wifi Router	R259.00	
DSF2309039	240GB (120GB Anytime Data + 120GB Night Surfer Data)	D-Link G413K Wifi Router	R309.00	
DSF2309041	360GB (180GB Anytime Data + 180GB Night Surfer Data)	D-Link G413K Wifi Router	R409.00	
DSF2306019	2TB (2TB Anytime Data)	D-Link DWR-957M Wifi Router	R779.00	
DSF2306021	Uncapped Data - All Hours 10Mbps	D-Link DWR-957M Wifi Router	R529.00	
DSF2306022	Uncapped Data - All Hours 20Mbps	D-Link DWR-957M Wifi Router	R679.00	

Send Your Supporting Documents

Send us the below application form completed along with the following supporting documents:

- Company Registration or CK document
- A clear copy of the director's ID (Does not need to be certified)
- Latest Telkom bill (Only required if you are an existing Telkom client)
- Proof of residential address of directors, not older than 3 months (Only required if you are not an existing Telkom client)
- Proof of banking - bank confirmation letter or 1 month bank statement (Only required if you are not an existing Telkom client)

✉ Email: sales@dsltelecom.co.za

📠 Fax: 086 582 9038

📞 Whatsapp: 087 150 8595

📞 Phone: 087 802 0917

Want to view all the Telkom LTE deals?

Click here - www.ltedeals.co.za or scan the QR code below:



Business ☐ Sections: 2/3/4/5/6/7/8(all)/10
 Self-Pay (mobile) ☐ Sections: 2/4/5/7/8(A-D)/10
 Change Ownership ☐ Sections: 2/3/4/5/6/7/8(all)/9/10
 Discontinue ☐ Sections: 9/10

ORIGINAL COPY

1. Office Use

Order No. Sales Agent ID/Salary Ref **DSL TELECOM**
 Dealer Code **DQ**
 RICA Information (Required for Mobile Products)
 Customer Representative as RICA Agent ☐ RICA by Sales Agent ☐ RICA on Delivery ☒

2. Business Customer Details

Existing or New Telkom Customer Existing ☐ New ☐
 Account No./Telephone No.
 Business Type
 Pty (Ltd) ☐ CC ☐ Partnership ☐ LTD ☐ Public Co. ☐ Sole Proprietor ☐ Government ☐ Other ☐ Please Specify
 Business Name
 Company Registration/ID No./Passport No. VAT No.
 Trade as Name No. of Employees
 Industry No. of Branches

3. Directors/Members

Name and Surname
 SA Citizen Yes ☐ No ☐ Identity/Passport No. Type of Permit/Visa
 Passport Exp. Date
 Name and Surname
 SA Citizen Yes ☐ No ☐ Identity/Passport No. Type of Permit/Visa
 Passport Exp. Date

4. Employee Details

Title Name Surname Initials
 Gender M ☐ F ☐ SA Citizen Yes ☐ No ☐ Identity/Passport No.
 Type of Permit/Visa Passport Exp. Date Date of Birth
 Marital Status* Married ☐ Single ☐ Divorced ☐ Widowed ☐ How are you married* COP ☐ ANC ☐ ANC with accrual ☐ Customary ☐
 Period Employed* Years Months Preferred Language
 Gross Monthly Income* Net Monthly Income* Total Monthly Expenses* Additional Income*
 Permission to Credit Vet* Yes ☐ No ☐
 Friend/Relative 1* Name Surname
 Relationship Telephone No.

*Mandatory fields for Self-Pay.

B. Mobile and Convergence

Package/Deal ID*	Device Make/Model*	Itemised Billing*	VAS 1	VAS 2	Spend Limit*	Quantity*
		Yes/No				
		Yes/No				
		Yes/No				
		Yes/No				
		Yes/No				

Total/Average Monthly Cost* R _____

**If no quote is done, these fields are all mandatory*

Subject to credit management approval

The split billing deal has been explained to me, I understand and accept it Authorised Signature _____ Date

Y	Y	Y	Y	M	M	D	D
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Office use: Split Bill code (based on exclusions): _____

~~C. Cellphone Numbers to be Ported to Telkom Mobile (Mobile and Convergence)~~

Account Classification at DSP* Pre-Paid, Post Paid or Hybrid	Account Type at DSP* Consumer or Business	DSP*	Account No. at DSP* (Per Invoice)	Account name at DSP* (Per Invoice)	Mobile No.	RICA Person Name Person RICA'd at DSP*	RICA Person ID/Company Reg. No.	Requested Port Date YYYY/MM/DD
N/A								

(*DSP – Donor Service Provider)

D. Porting Declaration (for Mobile Products)

I, the undersigned, hereby confirm that I have been informed of the following and agree to these statements:

- I am porting to Telkom Business Mobile.
- I acknowledge that in the event of Donor Service Provider rejection, my service will be activated with an 081/061 Telkom Business Mobile MSISDN number.
- I acknowledge and accept that call credits/unused values from the Donor Service Provider are forfeited.
- I am responsible and liable for outstanding fees owing to the Donor Service Provider.
- I am responsible for all cancellation fees incurred when a cancellation request is received during the application process.
- Products and services offered at the Donor Service Provider might not necessarily be available at Telkom Business Mobile.
- I have read, understood and hereby agree to the terms and conditions as set out in the application form.

Authorised Signature _____ Date

Y	Y	Y	Y	M	M	D	D
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E. RICA Person

[illegible]

Residential Address	Unit/Stand/Street	
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Suburb City Postal Code Province

Mobile No. [illegible]

Residential Address	Unit/Stand/Street	
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Suburb City Postal Code Province

Mobile No.

Documents required for RICA purposes: Identity Document/Passport; Proof of Residence; Company Registration and Company Proof of Residence.

5. Contact Information

Office Telephone No. Home Telephone No. Mobile No.*

Fax No. Email Address*

Physical Address* Unit/Stand/Street

Suburb City Postal Code Province

Delivery Address same as Physical Yes ☐ No ☐

Delivery Address Unit/Stand/Street

Suburb City Postal Code Province

Requested install/deliver date

Installation Address same as Physical Yes ☐ No ☐

Installation Address* Unit/Stand/Street

Suburb City Postal Code Province

Postal Address* PO Box/P Bag City Postal Code Province

Permission to Market Yes ☐ No ☐ Market via Email ☐ Phone ☐ SMS ☐ Post ☐

*Mandatory fields for Self-Pay.

6. Billing Information

Invoice Care of

Name on Bill

Cost Centre

Invoice Delivery via Post ☐ Email ☐ Email Address

Billing Address same as Postal Address Yes ☐ No ☐

Billing Address Unit/Stand/Street

Suburb City Postal Code Province

7. Banking Details (Debit order compulsory)

Should you not have sufficient funds in your account on the required due date, Telkom will make use of NAEDO to collect the arrears amount. These collections will be at your cost.

Bank Branch name Branch code

Account Holder Name Account No.

Debit Dates 5th ☐ 10th ☐ 15th ☐ 20th ☐ 25th ☐ Last day of the month ☐ Type of Account

Debit Order Maximum Amount

Full Name Signature Date

8. Services

A. Fixed Line

How many lines do you require When do you require your telephone service

Do you want to use your existing line Yes ☐ No ☐ If yes, what is the telephone number

Service provider of existing line Do you require entry in the phone book Yes ☐ No ☐

Product **Contract Period**

Telkom Voice Line 12 ☐ 24 ☐

Telkom Fixed Line look-alike 24 ☐

Telkom DSL Line 12 ☐ 24 ☐

DSL Line Speed required

Self install Yes ☐ No ☐

Telkom ISDN2 12 ☐ 24 ☐

Telkom ISDN2a 12 ☐ 24 ☐

Calling Plan 12 ☐ 24 ☐

Bundles 12 ☐ 24 ☐

Internet 12 ☐ 24 ☐

PBX 12 ☐ 24 ☐ 36 ☐ 60 ☐

Calling Plan

Bundle required

Internet required

Outright purchase or contract period

9. Discontinuing Your Service/Outgoing Customer Consent for Change of Ownership

Telephone Numbers to be discontinued _____ When do you want to discontinue the service

Y	Y	Y	Y	M	M	D	D
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Phone Phone Phone

How would you like to receive the final invoice Post ☐ Email ☐ Email Address

Postal Address P.O. Box/P Bag City Postal Code Province

ID/Passport No. Surname Initials

Authorised Signature _____ Date

Y	Y	Y	Y	M	M	D	D
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When do you want to discontinue the service

~~Y Y Y Y M M D D~~

N/A

Email Address

me

Date _____

e ~~Y Y Y Y M M D D~~

[illegible]

If acting in a representative capacity, that I am duly and fully authorised to do so. I personally hereby indemnify and hold Telkom harmless for any damages suffered by it, should it at any stage appear that I'm not so authorised. The information supplied herein with regards to me and the Applicant is complete, true and correct as at date of signature/electronic processing hereof. Electronic processing of the transaction (telephonically or via Internet portal) will be binding on me and/or the Applicant as if I have signed a physical application form, upon:

- I and/or the Applicant, am bound to the terms and conditions applicable to the transaction, including but not limited to:**

- I declare myself familiar with and bound to the content of said terms and conditions Yes ☐ No ☐

Internet	<input type="checkbox"/>	Paper	<input type="checkbox"/>	Email	<input type="checkbox"/>	Email Address	<input type="text"/>
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Date _____

(Duly authorised for/on behalf of the company)

SA Citizen	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Identity/Passport No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Type of Permit/Visa	<input type="text"/>
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Passport Exp. Date Permission to Credit Vet Yes ☐ No ☐

DSL Telecom

Date _____