



Telkom
Authorised Service Provider

DSL Telecom

Suite 6a. First Floor, Waterstone Village Office Park,
Corner Main Road & R44, Somerset West, 7130

Tel: 087 802 0917 | Email: sales@dsltelecom.co.za

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 UNCAPPED LTE PACKAGE				
Deal ID	Telkom LTE Package	Hardware	Monthly Price	Selection
DSF2604016	SmartBroadband Uncapped Daytime 20Mbps	Sim Only	R299.00	
DSF2604060	SmartBroadband Uncapped Daytime 20Mbps	Sim + D-Link G413X Wi-Fi Router	R369.00	
DSF2604017	SmartBroadband Uncapped All Hours 10Mbps	Sim Only	R299.00	
DSF2604061	SmartBroadband Uncapped All Hours 10Mbps	Sim + D-Link G413X Wi-Fi Router	R369.00	
DSF2604014	SmartBroadband Uncapped All Hours 20Mbps	Sim Only	R449.00	
DSF2604069	SmartBroadband Uncapped All Hours 20Mbps	Sim + D-Link DWR-957X Wi-Fi Router	R539.00	
DSF2604015	SmartBroadband Uncapped All Hours 30Mbps	Sim Only	R599.00	
DSF2604070	SmartBroadband Uncapped All Hours 30Mbps	Sim + D-Link DWR-957X Wi-Fi Router	R689.00	

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

📞 Whatsapp: 087 150 8595

📞 Phone: 087 802 0917

Want to view all the Telkom Uncapped LTE deals?

Click here - www.uncappedlte.co.za/businesshours 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

Dealer Code

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.

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 Bundles Internet PBX

N/A

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

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

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

Account Classification at DSP* Prepaid, 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

E. RICA Person

Name Surname SA Citizen Yes No

Identity/Passport No. Type of Permit/Visa Passport Exp. Date

Residential Address Unit/Stand/Street

Suburb City Postal Code Province

Mobile No.

Name Surname SA Citizen Yes No

Identity/Passport No. Type of Permit/Visa Passport Exp. Date

Residential Address Unit/Stand/Street

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.

