

Fax to Email Service.

For Just **\$11** a month Delacon can set your company up with a landline telephone number that your customers can fax faxes to you on.

Messages are:

- a) Emailed directly to your email address.

Pricing

Plan 1.

- One off connection fee \$20
- Monthly fee \$11 (includes 30 minutes faxing)
- Faxes/min \$0.26 (after 30 minutes/month)

Plan 2.

- One off connection fee \$20.00
- Monthly fee \$34.50 (includes 250 minutes)
- Faxes/min \$0.16 (after 250 minutes/month)

All pricing on this form is GST exclusive.

By submitting this order form you do so fully understanding and acknowledging our Terms and Conditions and our Privacy Policy (which is located on our website (www.delacon.com.au)).

Signed by authorised signatory of Customer:

Signature..... Date:

If you have any questions, Please phone us on 1300 990 999, or email us at contact@delacon.com.au

Service Application for Fax Service.

Thank you for choosing Delacon Pty Limited (A.B.N. 42 074 596 553). All information provided by you is held in strict confidence by Delacon Pty Limited and is not used for any purpose other than the direct provision and support of Delacon Pty Limited and associated services.

SECTION 1: CUSTOMER ACCOUNT DETAILS

Do you have an existing Delacon Account?

No (go to Section 2) Yes. Account number: _____ (go to Section 3)

SECTION 2: CUSTOMER DETAILS

Customer name	
Business Name	
ARBN / ACN	
Full Address	
Phone number	
Email address	

SECTION 3: SERVICE DETAILS

Please circle whichever is applicable, or enter the necessary information.

Item	Information	Detail
1	Which local area do you want your new number for?	Sydney / Melbourne / Brisbane Perth / Adelaide
2	Which Plan do you want	(1) or (2)

SECTION 4: PAYMENT DETAILS

I authorise Delacon to debit from my credit card account, the details of which are set out below: a) payment for the usage that I have selected and at the price stated in this form. b) payment for any Delacon invoices which are more than 21 days overdue and about which I have not disputed by providing Delacon with written notification of the dispute. Note: The cardholder must be the applicant.

Circle one please:	Visa / MasterCard
Credit Card Number	
Expiry date	
CCV Number (3 digits on back of card)	
Name on Card	
Cardholders Signature	

FAX ALL PAGES TO: 02 8221 9491