

CHANGE &/OR ADD AUTHORISED PERSON ON ACCOUNT

Please TYPE YOUR DETAILS in the highlighted fields.
 Print, sign, and scan this form before sending to support@alltel.com.au

Alltel Pty Ltd
 (ABN 66 178 860 153)
 622 Ferntree Gully Road Wheelers Hill VIC 3150
POSTAL ADDRESS: PO BOX 5133 Brandon Park VIC 3150
 Phone: 1300 ALLTEL (1300 255 835)
 Fax: 1300 255 855
 Email: support@alltel.com.au

CUSTOMER ACCOUNT DETAILS

Existing Alltel Account Number _____

Customer's Company Name/ Legal Entity _____

* Full Name of First Authorised Person:		
Position/Title in Business:	Email:	
* Drivers Licence Number and State:	* Date of Birth:	* Mobile:
* Residential Address:		
Suburb:	State:	Postcode:
* Full Name of Second Authorised Person:		
Position/Title Business:	Email:	
* Drivers Licence Number and State:	* Date of Birth:	* Mobile:
* Residential Address:		
Suburb:	State:	Postcode:

CUSTOMER DECLARATION

I/We _____

Hereby request Alltel to provide me/us with the Services and agree that I/we;

- have read, understand and accept the Alltel Terms and Conditions and Privacy Statement displayed at www.alltel.com.au/terms.html and www.alltel.com.au/privacy.html and the Direct Debit Request / Payment Terms & Conditions attached;
- are not under any term contract unless otherwise stated and may cancel the Services at any time by providing Alltel with one full calendar month's prior written notice;
- have read, understand and accept the rates and fees charged by Alltel for the Services and that these may change from time to time;
- will test all provided service numbers prior to publishing them in any medium.
- declare that information provided in this Form is true and correct and will be relied on by Alltel to obtain credit checks if applicable and to provide the Services;
- are legally authorised to sign this Form.

Signature: _____ Date: _____

Signature: _____ Date: _____