

APPLICATION CHECKLIST

Please ensure that all the relevant information listed below is provided before submitting your application to Vocae Telecoms. All documentation can be emailed to info@vocae.co.za

Documentation Required for VoIP and Hosted Switchboard Services

- Signed Subscription Form
- Initialled Terms
- ID Book or Passport of Authorised Signatory
- Debit Order – Signed with correct banking details

Documentation Required for Number Porting

- A signed letter addressed to your current telecommunications provider requesting the following: "Please port the following numbers to Vocae Telecoms" and listing the exact numbers to be ported.
- If you would like to retain your ADSL line please include the following in the letter: "I would like to retain my ADSL line, [phone number], after porting. Please arrange for a new number to be assigned to my existing ADSL service."
- Please ensure that this letter is provided on a company letterhead if the porting required is for a business.
- Complete Phone Account (Not just the cover page)

Estimated Turn Around Times for the processing of New and Existing Applications

VoIP Line/Trunk Services (without number porting and hardware)	1 Working Days
VoIP Line/Trunk Services (with number porting and or hardware)	6 Working Days
Hosted Switchboard Services	2 Working Days

- Vocae Telecoms will make every effort to meet the turnaround times listed above but will not guarantee said time frames.
- Priority Orders: Urgent processing will only be considered where fair and reasonable justification is provided.
- A R1 000.00 once-off surcharge applies for expedited processing (4-hour turnaround excluding ports).

Expedited Application

Please expedite this application at a once off cost of R1, 000.00 YES NO

Client Particulars**Business / Organisation** (leave blank if client is an individual)

Organisation name:			
Registration number:			
VAT number:			
Individual (if client is an individual) Authorised Signatory (if client is a business / organisation)			
Full name:			
Identity number:		Email Address:	

Contact Details

Email Address:			Invoices shall be sent to this address.
Phone Number:		Fax Number:	
Postal Address: (Required)			
		Postal Code:	
Physical Address: (Required)			
		Postal Code:	

Payment Details

Bank:		Branch Code:	
Branch Name:		Account Number:	
Account Holder:			
Account Type	Cheque	Saving	Transmission
I hereby grant Edge Innovation authority to debit my/our bank account for all amounts payable in terms of this agreement.			
Signature		Name of signatory	

telecoms

Acceptance

I have read and understood the terms and conditions of service and confirm my acceptance thereof.

Signature:		Date:	
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	Basic Package	Soho Package	Corporate Package
Monthly Cost	Free	R 79.00	R 149.00
Concurrent Calls	1	2	4
Billing Type	60/60	60/30	60/1
SA Mobile	R 0.69 p/min	R 0.69 p/min	R 0.69 p/min
SA Telkom	R 0.30 p/min	R 0.30 p/min	R 0.30 p/min
VANS	R 0.45 p/min	R 0.45 p/min	R 0.45 p/min
Chosen Package	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Hosted PBX Service

Extensions Required:		
Service Fee's	R 89 p/m – Per Extension (Billing Increments 60 / 1)	
Requirements:	➤ VoIP Telephones for Extension	
Optional:	Call Recordings & Reporting 60 000 Minutes Storage 240 000 Minutes Storage 600 000 Minutes Storage 1 200 000 Minutes Storage 3 000 000 Minutes Storage 3 000 000 < Minutes Storage	Price P/M R 395.00 R 795.00 R 1 295.00 R 1 795.00 R 2 495.00 Special Pricing On Request

Other Services / Additional Information

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Package Acceptance

I have read and understood the terms and conditions of service and confirm my acceptance thereof.

Signature:		Date:	
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