

# Domain Hosting Registration form

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Consultant / Reseller : \_\_\_\_\_

## 1.Subscriber Details

Are you an existing ACM Technology Hosting Client?

Yes: [ ] No: [ ] If yes please skip section 2 (a), 2(b) & 6

Company: \_\_\_\_\_

Trading as: \_\_\_\_\_

Company Reg No: \_\_\_\_\_

VAT No: \_\_\_\_\_

Type of Business: Public Co: ( ) (Pty) Ltd: ( ) CC: ( )

**Company Location**

Professional Partner / Inc: ( ) Government: ( ) Trust: ( ) NGO: ( )

Local: [ ] International: [ ]

## 2a.Primary Contact Person

Name: \_\_\_\_\_

**2b.Principal Place of Business**  
Address: \_\_\_\_\_

Surname: \_\_\_\_\_

\_\_\_\_\_

ID No.: \_\_\_\_\_

\_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Is your premises: Owned: [ ] Leased: [ ]

Mobile: \_\_\_\_\_

Is Your Postal address the same as the principal

Installation / Delivery Address

place of business Yes: [ ] No: [ ]

\_\_\_\_\_

If not please provide your postal address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postal Code: \_\_\_\_\_

## 3.Domain

Domain Status: New Domain [ ] Existing Domain [ ]

Domain Name: \_\_\_\_\_

Registration: \_\_\_\_\_

\_\_\_\_\_

Registration: \_\_\_\_\_

\_\_\_\_\_

Registration: \_\_\_\_\_

\_\_\_\_\_

Registration: \_\_\_\_\_

Number of Email Addresses: \_\_\_\_\_

E-mail Address: 1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

4) \_\_\_\_\_

5) \_\_\_\_\_

6) \_\_\_\_\_

7) \_\_\_\_\_

8) \_\_\_\_\_

9) \_\_\_\_\_

10) \_\_\_\_\_

Bandwidth Type: Local: [ ] International: [ ] Monthly Fee \_\_\_\_\_

Traffic space allocated per Month \_\_\_\_\_ MB R \_\_\_\_\_ per MB OBR

Disk space allocated per Month \_\_\_\_\_ MB R \_\_\_\_\_ per MB OBR

## 4.Domain Yearly Registration

[1] co.za-R200 [ ] [2]za.net-R150 [ ] [3].biz-R250 [ ] [4].us-R200 [ ] [5].org-R250 [ ]

[6] net-R250 [ ] [7].name-R250 [ ] [8].info-R250 [ ] [9].com-R250 [ ]

[10]co.uk-R300 [ ] [11].mobi-R300 [ ] [12].org.za-R400 [ ] [13].bz-R450 [ ] [14].za.com-R1500 [ ]

## 5.Domain Transfer

Current Host Name \_\_\_\_\_ Have you given notice: Yes: [ ] No: [ ]

Domain Release Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Domain Transfer Fee \_\_\_\_\_

## 6.Payment Details

Payment method: Direct debit [ ] EFT: [ ] Debit Date: 25th: [ ] Last: [ ] 1st: [ ]

Details for debit order: Bank Account type: Current: [ ] Transmission: [ ] Savings: [ ]

Account Holder: \_\_\_\_\_ Bank: \_\_\_\_\_

Branch name: \_\_\_\_\_ Branch code: \_\_\_\_\_

Account No: \_\_\_\_\_ Billing contact details: \_\_\_\_\_

Authorised account holders signatory: \_\_\_\_\_ Contact number: \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_

I/We hereby request, "instruct" and authorize you to draw against my/our account with the abovementioned bank (or any other bank or branch to which I/We may transfer my/our account) the sum of R\_\_\_\_\_ (and amount in words), on \_\_\_\_\_ day of each and every month commencing on \_\_\_\_\_ and continuing (as the case may be). All such withdrawals from my our bank account by you shall be treated as though they had been signed by me/us personally. I/We understand that the withdrawals hereby authorised will be processed by computer through a system known as the ACB Magnetic Tape Service, and i also understand the details of each withdrawal will be printed on my bank statement or on an accompanying voucher. This authority may be cancelled by me/us by giving you 30 days notice in writing, sent by prepaid registration post, but i/we understand that I/we shall not be entitled to any refund of amounts which you have withdrawn while this authority was force if such amount were legally owing to you. Receipt of this instruction by you shall be regarded as receipt thereof by my/our bank(whichever it is or shall be)

### ASSIGNMENT

I/We acknowledge that the party hereby authorised to effect the drawing(s) against my/our account may not cede or assign any of its rights to any third party without my/our written consent and that I/We may not delegate any of my/our obligation in term of this contract/authority to any third party without prior written consent of the authorised party.

Signed \_\_\_\_\_ on this \_\_\_\_\_ day of 20 \_\_\_\_\_

Capacity: \_\_\_\_\_ Assisted: \_\_\_\_\_ Authorised Signature: \_\_\_\_\_