

iBurst Subscriber Cancellation Request Form

iBurst (Pty) Ltd, Johannesburg: iBurst House, 66 Park Lane, Sandton, 2196; PO Box 651921, Benmore, 2010



authorised distributor

FAX Back to 086 686 9842

SUBSCRIBER DETAILS (Fields marked with an * are not compulsory)

Individual: Business: Contract No:
Subscriber / Business Name: iBurst Username:
Identity No / Company Registration No:
Type: SA ID document: Passport No: Public Company: (Pty) Ltd: CC: Professional Partnership: / INC Other:

CONTACT DETAILS

Work Tel No: ()
* Fax No: ()
* Home Tel No: ()
Mobile No:
Email Address:

CANCELLATION DETAILS

Cancellation Category: Seven day: One calendar month: Calendar month notice end date:
Other (explain):

REASON FOR CANCELLATION

iBurst, in an effort to improve customer service, would appreciate it if the subscriber could provide a reason for wishing to end their iBurst service contract.

CANCELLATION INSTRUCTIONS

I / we _____ (print subscriber's name) the undersigned, being the duly authorised account holder for the above mentioned iBurst contract, hereby instruct and authorize iBurst (Pty) Ltd to cancel the iBurst contract, described above. If the cancellation is approved the subscriber and iBurst will be released from any obligations that either has in terms of subscriber agreement.

Date: _____ Place: _____ Authorised signature: _____

Subscriber Cancellation Terms and Conditions

- 1 A cancellation request will be acted upon when this signed cancellation form has been received by iBurst, either as a fax sent to 086 503 9111 or an email attachment sent to info@iburstgroup.co.za or handed into your local iBurst office.
- 2 This cancellation is subject to approval by iBurst.
- 3 Cancellations are subject to a once off administration fee.
- 4 A 24 month contract cancellation request will only be evaluated after the modem is returned to iBurst or an iBurst partner from where the modem was originally provided, in its original packaging and condition.
- 5 If a hardware refund is applicable, it will be provided by the legal entity that provided the subscriber with the hardware originally.
- 6 A seven day cancellation request will only be evaluated if this signed form is received by iBurst within seven (7) calendar days from the date the subscriber activated the modem.

For iBurst office use only (This section to be completed only where a modem must be returned to iBurst directly) iBurst confirmation of receipt of modem.

I, being an authorised iBurst representative, confirm the receipt of the modem in its original condition and packaging from the above mentioned subscriber. I have tested the modem and have found it to be in a good working order. This cancellation has been approved by the iBurst retentions department.

Modem UT ID:

Activation date of contract: Cancellation date of contract:

Authorized iBurst signature: _____ Date: _____

Print Name: _____

Any missing components/other notes: _____

Please fax this completed signed form and a copy of your ID to 086 686 9842