



DEDICATED SERVER REQUEST FORM

PLEASE COMPLETE ONE COPY PER APPLICATION

Complete the details below and return by fax to: N.I. 028 9020 1203, R.O.I. 1890 923 994. If you require assistance please contact us on: N.I. 0845 2470000, R.O.I 1890 926 000 or email domains@u.tv. **Failure to complete all sections of the form may result in your order being delayed.**

APPLICANT DETAILS: Please complete all fields below.

N.B. All prices exclude VAT.

Title: Mr Mrs Ms Miss Dr First Name: Surname:

Company Name:

Address 1:

Address 2:

Town: County: Area:

Email: Tel: VAT Number:

DEDICATED SERVER PACKAGES: N.B. All prices exclude VAT. Excludes cost of domain registration.

PACKAGE	BANDWIDTH PER MONTH	SETUP FEE		COST PER MONTH		SELECT
		£	€	£	€	<input checked="" type="checkbox"/>
Server	8GB	200.00	253.95	89.00	113.00	<input type="checkbox"/>
Server Pro	16GB	200.00	253.95	159.00	201.53	<input type="checkbox"/>

DURATION OF HOSTING 12 Months 24 Months 36 Months

BESPOKE SERVER PACKAGES: Please complete this section if you require UTV Internet to provide you with a quote for your own Server package. We will contact you at the soonest available opportunity to confirm if your requirements are possible and how much the package will cost.

Enter text here (Please attach additional sheets if required)

PLEASE NOTE: You will be invoiced for the cost of equipment/installation after the service is set up, unless stated otherwise during the order process.



N.I. BUSINESS PAYMENT FORM

PLEASE INCLUDE WITH SERVICE ORDER FORM

Return the completed form by fax to **028 9020 1203**. If you require assistance please contact us on **0845 2470000** or **admin@u.tv**
Failure to complete relevant sections of this form may result in your order being delayed.

PAYMENT DETAILS: Please complete if payment details differ from those on accompanying order form.

Title: Mr Mrs Ms Miss Dr First Name: Surname:

Company Name: VAT Number (if applicable):

Address 1: Town:

Address 2: County: Postcode:

Email: Tel: Fax:

BILLING OPTIONS: Please choose your method of payment.

INVOICE

PLEASE NOTE: If payment is not received within 30 days of invoice, all services will be suspended. If payment has not been received within 60 days, all services will be cancelled and domain names released back into the public domain.

CREDIT/DEBIT CARD

Card Type: Visa Mastercard Switch

Card Number: Start Date (if applicable):

Expiry Date: Issue No. (if applicable):

Signature: Date:

DIRECT DEBIT

Instructions to your Bank or Building Society to pay Direct Debits

Please fill in the whole form and return to:

UTV Internet Ltd, Ormeau Road, Belfast, BT7 1EB



Enter name and full postal address of your Bank or Building Society branch:

Originator's Identification Number:

To: The Manager

UTV Internet Reference Number:

Instructions to your Bank or Building Society:

Name(s) of account holder(s):

Please pay UTV Internet Direct Debits from the account detailed on this instruction subject to the safeguards assured by The Direct Debit Guarantee as shown below.

Bank or Building Society account number:

I understand that this instruction may remain with UTV Internet and if so, details will be passed electronically to my Bank/Building Society.

Branch sort code:

Signature(s):

Date:

- Banks and Building Societies may not accept Direct Debit instructions for some types of account.
- For full terms and conditions please refer to www.u.tv

The Direct Debit Guarantee (Please remove and retain for you own records)

- This guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the Scheme is monitored and protected by your own Bank or Building Society.
- If the amounts to be paid or the payment dates change, you will be told of this in advance by at least 14 days or as agreed.
- If an error is made by UTV Internet or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.
- You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please also send a copy of your letter to us.





R.O.I. BUSINESS PAYMENT FORM

PLEASE INCLUDE WITH SERVICE ORDER FORM

Return the completed form by fax to **1890 923 994**. If you require assistance please contact us on **1890 926 000** or **admin@u.tv**
Failure to complete relevant sections of this form may result in your order being delayed.

PAYMENT DETAILS: Please complete if payment details differ from those on accompanying order form.

Title: Mr Mrs Ms Miss Dr First Name: Surname:

Company Name: VAT Number (if applicable):

Address 1: Town:

Address 2: County:

Email: Tel: Fax:

BILLING OPTIONS: Please choose your method of payment.

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To: The Manager

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