



Plot 2635 • Phuti Crescent • Extension 9  
P. O. Box 301ABG • Gaborone • Botswana  
Tel: +267 74 135 495 • +267 71 358 103

## Business Service Request Form

### Organisation Details

Organisation Name			
Contact Number(s)			
Postal Address			
Physical Address			
E-mail Address			
Registration Number		VAT Number	
Installation Address			

### Directors

	Director 1	Director 2	Contact Person
Name and Surname			
Omang/Passport Number			
Mobile Number			

### Banking Details

Bank Name		Account Number	
Branch		Branch Code	

### Packages

<b>Contract Period</b>	12 Months	24 Months
<b>Speed</b>	5 Mbps	10 Mbps
	15 Mbps	20 Mbps

### Declaration

I/We
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accept Velvet Voice Terms and Conditions. I/We confirm that the information provided to be true and accurate. I/We undertake to notify Velvet Voice of any changes to the above particulars.

Signature of Authorised Person	
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Date	
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\* Attach CIPA Certificate of Incorporation and Company Extract



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## Residential Service Request Form

(\*You can type on this editable form)

### Customer Details

Name		Surname	
Omang/Passport		Contact Number(s)	
Postal Address			
Physical Address			
E-mail Address			
Installation Address			

### Banking Details

Bank Name		Account Number	
Branch		Branch Code	

### Packages

<b>Contract Period</b>	12 Months	24 Months
<b>Speed</b>	5 Mbps 15 Mbps	10 Mbps 20 Mbps

### Declaration

I
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accept Velvet Voice Terms and Conditions. I confirm that the information provided to be true and accurate. I undertake to notify Velvet Voice of any changes to the above particulars.

Signature	
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Date	
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\* Attach copy of Omang/Passport