To: Customer Care Centre
Sure South Atlantic Limited
PO Box 2
Jamestown
St Helena Island
Tel: +290 22900; Fax: +290 22094
Email: service@sure.co.sh

BROADBAND APPLICATION FORM

A helpdesk for configuration and support is available on telephone 24000, charges incurred are 3p per minute

Application No:	Advice No:	Date:

FULL NAME OR COMPANY TITLE OF APPLICANT

ADDRESS OF APPLICANT

NATURE OF BUSINESS OR OCCUPATION OF APPLICANT

ACCOUNT NUMBER	TELEPHONE NUMBER

CUSTOMER SERVICE CLASS

GOV		BUS		RES		DUAL	

PACKAGE REQUIRED LITE ☐ **BRONZE** ☐ SILVER ☐ SILVER + ☐ GOLD ☐ GOLD + ☐

SERVICE DATE

Example: X3i6G2 (combination of alpha-numeric characters)

I.D:

Password:

		EX-DIR

Email Address:

	Yes	No

Example: candw.bureau@helanta.co.sh

ADDITIONAL WEBMAIL ACCOUNTS (Total Entitlement: Gold 5, Silver 3, Bronze 2) (combination of alpha-numeric characters)

Email Address		Password	
Email Address		Password	
Email Address		Password	
Email Address		Password	

	USB PORT	ETHERNET PORT			
MODEM TYPE	DUAL		ETHERNET		WI-FI

NUMBER OF FILTERS REQUIRED		**NUMBER OF COMPUTERS**	

COMPUTER DETAILS

Operating System		Email Program	
RAM		Processing Speed	

OTHER DETAILS

Short Term Customer	Yes	No	Cease Date	

BILLING INFORMATION

Please indicate the e-mail address you would you like your Monthly Invoices emailed to:

Aftercare contact email adress:

Authorised Signatory	Date

ACCEPTED ON BEHALF OF SURE SOUTH ATLANTIC LIMITED

Sig. RM&CS Manager	Sig. Finance Manager	Sig. RM&CS Rep.

I HAVE READ AND AGREED TO THE BROADBAND GENERAL TERMS AND CONDITIONS