



faces not numbers



Service Addition Digital Lines

By signing this form you agree to our terms and conditions
For full details of our terms and conditions please visit www.adept-telecom.co.uk

Company Name:		Customer Account No:	
Contact Name:	Business Partner:		
Contact No:	Contact No:		
Email:	Email:		
Install address <i>(must include full address details including postcode):</i>		Billing address if different:	
		Billing email address:	
Service Required?	ISDN2	ISDN30	Is it a conversion? Yes / No
Installation Details			CLI
Details of where ISDN is to be installed			Information required
Room:	Number of channels required:		
Floor or Level:	Number of DDI's required:		
Wall or Rack Mounted:	Additional Info: i.e. Conversion support notes/ COA & Conversion ect		
Shared Premises: Y / N			
Date required:			
On Site Contact:			
Contact Number:			
Required Features			
Please detail features (i.e CLIP)		Care Level Required	Y / N
		Care Level 2 (Standard)	
		Care Level 3	
		Care Level 4	
		Site Assurance (ISDN30 Only)	
By signing, this is an addition to your master service agreement and you agree to our terms and conditions and charges for the requested order. For full details of our terms and conditions, and prices please visit www.adept-telecom.co.uk .			
Signed:	Print Name:	Date:	