



Company Reg number: 2014/025228/07

Client Subscriber Form

Personal details:

Client full names and surname:			
Company name:			
ID/Company reg:			
Physical address:		Postal address:	
Email address:			
Email address for billing:			
Home tel:		Work tel:	
		Cell:	

Asset details:

Asset make & model:		Registration/Fleet number:	
Year model:		Colour:	
Vin:		Engine:	
Automatic		Manual	

Emergency contact details:

(1) Name & Surname:		(2) Name & Surname:	
Contact number:		Contact number:	
Relation:		Relation:	

Product details:

Product name:		Product Selected: CASH / RENTAL	CASH	RENTAL 12 / 24 / 36
Total monthly subscription D/O:	R	Once of installation cost: (Labour charge)	R	
Extra Add on's:				
Device sim number:				
Client call out Required to Client premisses AA rates apply (From Pretoria, Gauteng):		PLEASE TYPE OR WRITE EXACT FITMENT ADDRESS HERE FOR FITMENT/S		

Banking details:

Account holder:				Bank:	
Account number:				Account type:	
Deduction date:	1	15	25	Last day	Branch code:
Account holder authorisation for D/O:				Product Tested Yes / No	
Client name and surname (block letters only)		Client debit order / EFT acceptance signature			

Confirmation:

I the account holder at Signatec Trading (PTY) Ltd hereby declare that all information given on this document is true and correct and I the "client" accept all liability and in the case of incorrect information given by me. The Asset installed with the Signatec product with matching credentials on this forms are true and correct provided by me (the client) to Signatec (Company) and I am the rightful owner of the Asset or Asset's as per the Sub Form and Asset Add On Form B.

Client signature:	Client acceptance of services	Witness:	
Place:		Date:	

FOR OFFICE USE ONLY

Username:		Fitment location:	
Contact start date:		Device IMEI:	
Fitment date:		Technician:	
Sim card contact number:		Sim type:	
Service provider:		Sim serial:	

SIGNATEC OFFICES AND EMERGENCY CONTACT NUMBER: (012)-004-1595