

Broadvoip Order Data Collection Form

For Modifications, please email this form to customerops@broadvoip.com.au

SITE DETAILS

Property Name :	<input type="text"/>	Building Type :	<input type="text"/>
Level No.	<input type="text"/>	Location Type :	<input type="text"/>
Unit No. :	<input type="text"/>	Building No. :	<input type="text"/>
Street Name :	<input type="text"/>		
Suburb	<input type="text"/>	State :	<input type="text" value="NSW"/>
Post Code :	<input type="text"/>		
Site Acronym:	<input type="text"/>		
Assurance Contact Name at Site	<input type="text"/>	Position:	<input type="text"/>
Phone	<input type="text"/>	Mobile:	<input type="text"/>
Fax No.	<input type="text"/>		
Is this the primary contact for the entire VPN?	<input type="text"/>		

SERVICE DETAILS

Services: VPN Voice Internet

VOICE DETAILS

Only complete this section if you selected the Voice service:

Number of total voice lines /simultaneous calls	<input type="text"/>	IP trunking	<input type="text"/>	Yes or No
Number of extensions not connecting to a phone system	<input type="text"/>	Number of connections connecting to a phone system	<input type="text"/>	

Extension details - Not applicable when connecting directly to a phone system

First Name	Last Name	Email	Voicemail	F Me, F Me	Alt. No.

Hunt group calling line ID

VPN DETAILS

Only complete this section if you selected the VPN service:

Head Office

Yes/No

Number of Remote desktop networking Connections:

QoS Classifications

Source IP	Source Netmas	Dest IP	Dest Netmask	Interface	Protocol	Source Port	Dest Port	Priority (Best effort or Interactive)

INTERNET DETAILS

Only complete this section if you selected the Internet service:

Port Address Translation Required

External Port	Internal IP Address	Internal Port

SERVICE DETAILS

Complete this section when providing Internet or VPN services:

Simple telephone service at site adjacent installation location

Access speed (if selecting upgrade)

kbps down

kbps up

QoS enabled for VPN at this site

Customer LAN details	Network		/	Netmask		Next hop	
Other network at this site			/				
			/				
New router address to be (Gateway)							
DHCP mode (none; relay; server)							
				Relay to		(if relay)	
Range			-			(address range if server)	
DNS				WINS			

Notes:

ADDITIONAL INFORMATION

to be used as directed by Broadvoip provisioning

Additional Info 1	
Additional Info 2	
Additional Info 3	
Additional Info 4	
Additional Info 5	
Additional Info 6	

Preferred porting time 1	Week day	<input type="text"/>	Start time	<input type="text"/>	Melbourne time
Preferred porting time 2	Week day	<input type="text"/>	Start time	<input type="text"/>	
Preferred porting time 3	Week day	<input type="text"/>	Start time	<input type="text"/>	

Require Broadvoip supplied PBX Technician

Customer Premise Equipment (CPE), specify type/ model (e.g. Commander)

Company Name of CPE Maintainer :

Name of Person at CPE Maintainer : Phone No.

DECLARATION/PRIVACY ACT

I have read Broadvoip's Standard Services Agreement/Master Services Agreement (as applicable) and agree to be bound by them. I understand that any commitment to my current carrier will be my responsibility and that Broadvoip not liable for any damages incur due to such commitment.

Broadvoip collects personal information from or about employees, principals or directors of the Customer in order to process the Customer's application. Please see clause 6 of Broadvoip's Standard Service Agreement/clause 7.2 of Broadvoip's Master Service Agreement (as appropriate) for important information about Broadvoip's proposed use of this personal information. I am authorised to disclose the personal information contained in this Application to Broadvoip and consent on behalf of the individuals named in this Application to Broadvoip so using and disclosing this personal information.

If Broadvoip considers it relevant to assess this Application for personal or commercial credit, I agree to Broadvoip obtaining from a credit reporting agency a credit report containing personal credit information about the employees, principals or directors of the Customer in relation to personal or commercial credit provided by Broadvoip, or otherwise set out in Broadvoip's Standard Services Agreement I have authority as the Customer's agent to make this Application and confirm that the information in this Application is true and correct.

Decision Makers' Signature _____ Date ____ / ____ / ____

Decision Maker Position