

## **Customer Registration Form**

Request	No.	
Kequest	INO.	

Data Centre Location: Please put "\" to the appropriate box  ONE (Kwun Tong)					
Registration Information (FULL NAME & IN BLOCK LETTER)  Part A - Company Information  Company Name (Full name)  Correspondence Address  Billing Address  Company Telephone No.  Company Fax No.  Part B - Contact Information  (1) Name * English Name (If any)  Email Tel  ***Contact Type:   Person-in-Charge   Maintenance   English Name (If any)  Email	<b>Data Centre Location:</b> <i>Please put "✓" to the appropriate box</i>				
Part A - Company Information  Company Name (Full name)  Correspondence Address  Billing Address  Company Telephone No.  Company Fax No.  Part B - Contact Information  (I) Name * English Name   (If any)   Email	ONE (Kwun Tong) JUMBO (Tsuen Wan) MEGA-i (Chai Wan) MEGA Two (Fotan)				
Correspondence Address  Billing Address  Company Telephone No.  Company Fax No.  Part B - Contact Information  (I) Name * English Name (If any)  Email Tel  ****Contact Type:   Person-in-Charge   Maintenance   Emergency	Registration Information (FULL NAME & IN BLOCK LETTER)				
Billing Address  Company Telephone No.  Company Fax No.  Part B - Contact Information  (1) Name * English Name (If any) Email Tel  ***Contact Type:   Person-in-Charge   Maintenance   Emergency     3rd party authorization   Billing   e-Invoice   Cabling    (2) Name * English Name (If any) Email Tel  ***Contact Type:   Person-in-Charge   Maintenance   Emergency     3rd party authorization   Billing   e-Invoice   Cabling    (3) Name * English Name   (If any) Email   Tel  ***Contact Type:   Person-in-Charge   Maintenance   Emergency     3rd party authorization   Billing   e-Invoice   Cabling    (4) Name * English Name   (If any) Email   Emergency     3rd party authorization   Billing   e-Invoice   Cabling    (4) Name * English Name   (If any) Email   English Name   (If any)	Part A - Company Information				
Billing Address  Company Telephone No.  Company Fax No.  Part B - Contact Information  (1) Name * English Name   (If any) Email Tel  ****Contact Type:   Person-in-Charge   Maintenance   Emergency   Billing   Person-in-Charge   Maintenance   Person-in-Charge   Maintenance   Person-in-Charge   Maintenance   Person-in-Charge   Maintenance   Person-in-Charge   Maintenance   Person-in-Charge   Person-in-Charge   Maintenance   Person-in-Charge   Person-in-Charge   Person-in-Charge   Person-in-Charge   Person-in-Charge   Person-in-Charge   Person-in-Char					
Company Fax No.  Part B - Contact Information  (1) Name * English Name   (If any) Email Tel  ***Contact Type:   Person-in-Charge   Maintenance   Emergency   Gabling   Emeral   Tel  ***Contact Type:   Person-in-Charge   Maintenance   Emergency   Gabling   G					
Company Fax No.  Part B - Contact Information  (1) Name * English Name   (If any)   Email Tel   ***Contact Type:   Person-in-Charge   Maintenance   Emergency     3rd party authorization   Billing   e-Invoice   Cabling    (2) Name * English Name   (If any)   Email Tel    ***Contact Type:   Person-in-Charge   Maintenance   Emergency     3rd party authorization   Billing   e-Invoice   Cabling    (3) Name * English Name   (If any)     Email Tel    ***Contact Type:   Person-in-Charge   Maintenance   Emergency     3rd party authorization   Billing   e-Invoice   Cabling    (4) Name * English Name   (If any)     Email Emergency   Emergency     3rd party authorization   Billing   e-Invoice   Cabling    (4) Name * English Name   (If any)     English Name   (					
Company Fax No.  Part B - Contact Information  (1) Name * English Name   (If any)   Email Tel   ***Contact Type:   Person-in-Charge   Maintenance   Emergency     3rd party authorization   Billing   e-Invoice   Cabling    (2) Name * English Name   (If any)   Email Tel    ***Contact Type:   Person-in-Charge   Maintenance   Emergency     3rd party authorization   Billing   e-Invoice   Cabling    (3) Name * English Name   (If any)     Email Tel    ***Contact Type:   Person-in-Charge   Maintenance   Emergency     3rd party authorization   Billing   e-Invoice   Cabling    (4) Name * English Name   (If any)     Email Emergency   Emergency     3rd party authorization   Billing   e-Invoice   Cabling    (4) Name * English Name   (If any)     English Name   (					
Part B - Contact Information  (1) Name *					
English Name   English Name   (If any)					
Email  ***Contact Type:   Person-in-Charge   Maintenance   Emergency   Cabling  (2) Name * English Name   (If any)  Email  ***Contact Type:   Person-in-Charge   Maintenance   Emergency   Emergency   Cabling  (3) Name * English Name   (If any)  Email  ***Contact Type:   Person-in-Charge   Maintenance   Emergency   Cabling  (3) Name * English Name   (If any)  Email  ***Contact Type:   Person-in-Charge   Maintenance   Emergency   Cabling  ***Contact Type:   Person-in-Charge   Maintenance   Emergency   Cabling  ***Contact Type:   Person-in-Charge   Maintenance   Emergency   Cabling  (4) Name * English Name   (If any)  Email   English Name   (If any)  Email   English Name   (If any)					
***Contact Type:					
3rd party authorization   Billing   e-Invoice   Cabling					
English Name   English Name   (If any)					
Email  ***Contact Type:   Person-in-Charge   Maintenance   Emergency   Cabling  (3) Name * English Name   (If any)  Email  ***Contact Type:   Person-in-Charge   Maintenance   Emergency   (If any)  Email   Emergency   English Name   (If any)  ***Contact Type:   Person-in-Charge   Maintenance   Emergency   Cabling   (If any)  [A Name * English Name   (If any)  Email   English Name   (If any)  Email   English Name   (If any)					
***Contact Type:					
3rd party authorization   Billing   e-Invoice   Cabling					
English Name   English Name   (If any)					
English Name   English Name   (If any)					
Email  ***Contact Type: Person-in-Charge Maintenance Emergency  3 <sup>rd</sup> party authorization Billing e-Invoice Cabling  (4) Name * English Name (If any)  Email Tel					
***Contact Type:  Person-in-Charge					
□ 3 <sup>rd</sup> party authorization □ Billing □ e-Invoice □ Cabling  (4) Name * English Name □ (If any)  Email □ Tel					
(4) Name *       English Name       (If any)         Email       Tel					
Email Tel					
***Contest Type: Derson in Charge Maintenance DEmanage Type:					
***Contact Type:  Person-in-Charge  Maintenance  Emergency					
$\square$ 3 <sup>rd</sup> party authorization $\square$ Billing $\square$ e-Invoice $\square$ Cabling					
(5) Name * English Name (If any)					
Email Tel					
***Contact Type:  Person-in-Charge					
$\square$ 3 <sup>rd</sup> party authorization $\square$ Billing $\square$ e-Invoice $\square$ Cabling					
* Name must match with HKID card / Passport					
*** Classification of Different Types of Registered Contacts: (More than 1 contact type can be choosen for 1 registered person)					
Contract Expiry & overdue payment issue notification  Contacts of (1) - (7)  Add/remove Authorize Third-party to access Dataquentre & Raise Payment issue notification  Access Dataquentre & Raise Payment issue notification  Notification					
1 Person-in-charge Yes Yes Yes Yes 2nd choice					
2     Maintenance Contact     No     No     No     Yes     2nd choice       3     Emergency Contact     No     No     No     Yes     1st choice					
4 3rd Party Authorization No No Yes No No					
5 Billing Contact The contact to which invoices and other billing related noticeswill be sent. If not registered, Invoices are sent to 'Accounts Departmen   6 E-Invoice The contact to receive invoices by email	ent'.				
6 E-Invoice The contact to receive invoices by email  7 Cabling Contact For MEGA-iAdvantage only. The contact who can raise cabling order, and receive cabling notices, eg A-end connects to B-End.					
Please fax back or email to our Customer Service Department Hotline: (852) 2208 8800 Fax No. (852) 2505 8047 Email: cs@iadvantage.net  Authorized Signature / Company Chop					