TIME FIBRE BROADBAND REGISTRATION FORM







Service Order No: BC597802

IMPORTANT NOTES

- 1. Please read all the Terms & Conditions accompanying the subscription of the Service(s) before completing this registration form.
- 2. Please write in CAPITAL LETTERS and tick ($\sqrt{\ }$) where applicable.

Same as the email in Section A

eBill (default)

Email

2. House which is 4. The Let retre and tok () whole applicable.						
A. APPLICANT INFORMATION						
Company Name	INK INTEGRATED SDN. BHD.					
Registration No.	1326583-P	No. of Staff 8				
Company Type	Sdn. Bhd. Bhd. Partnership S	ole Proprietor Others (Please specify)				
Industry	Service Retail Finance F	&B Public Sector Others (Please specify)				
Title	Mr. Mrs. Ms. D	r. Others (Please specify)				
Full Name (as per My	r MyKad/Passport) WONG YU LEE					
Designation	Director					
MyKad/Passport No.	7 0 1 2 3 1 - 1 0 - 5 2 4 0 Nationality Malaysian					
Email	ulee@inkintegrated.com					
Contact No.	0 1 2 - 2 0 3 3 1 7 0 (Office) 0 1 6 - 3 3 8 9 5 0 6 (Mobile)					
B. SERVICE INSTALLATION DETAILS						
The representative inc	dicated must be available during the service installati	on.				
Same as the app	olicant's info in Section A					
Title	Mr. Mrs . Ms. D	r. Others (Please specify)				
Name	Jeanne Lee					
Designation	Manager Email	jeanne@inkintegrated.com				
Contact No.	- (Office)	0 1 6 - 3 3 8 9 5 0 6 (Mobile)				
Your installation addre	ess					
Address	F-02-18, IOI BOULEVARD BLOCK F					
	Jalan Kenari 5, Bandar Puchong Jaya					
City/State	Puchong, Selangor	Postcode 4 7 1 0 0				
Preferred Installation	Date and Time Slot (1) D D - M M - Y Y	Y Y Morning / Afternoon				
	(2) D D - M M - Y Y	Morning / Afternoon				
	(3) D D - M M - Y Y					
C. PLAN DETAILS						
TIME Fibre Broadbar	nd	Included in your plan :				
✓ 300Mbps BM45		1 Dynamic IP				
Terms and conditions ap		2 Voice Lines*				
	y/terms-and-conditions/retail-edition	Wireless AC Dual Band Router				
Price(s) subject to Service Tax where applicable.		100GB TIME BizCloud Storage**				
Contract Period						
24 Months		*11 sen/min for domestic calls and 8 sen/min for IDD calls to 60 countries.				
Balance charges for the upon early termination	ne remaining contractual months will apply n.	**Valid for 24 months only				
Non-Recurring Fee						
Deposit	: RM 1,000.00	Remarks				
Applicable for foreign	registered company (without SSM registration).					
D. BILLING MODE						

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E. AUTO DEBIT APPLICATION

Register to enjoy RM2 off your Internet subscription fee every month.

Please note that we are unable to perform Card-Not-Present (CNP) transactions on HSBC and Standard Chartered Debit Cards. For more details, please contact your bank. Please attach an authorisation letter from primary cardholder if different from subscriber name.

Card Type

Card Issuer

Card No.

Name on Card

Expiry Date

M M - Y Y

F. DOCUMENTS & DECLARATION

Documents Required

Local Registered Company

- 1. Photocopy of MyKad (both sides)/Passport (for non-Malaysian)
- 2. Photocopy of Form 9/Form 13/Notice of Registration (Section 15)/Certificate of Incorporation (Section 17)/Section 28/Certificate of Practice issued by the relevant authority (NGO/Association/Cooperative)

Foreign Registered Company

- 1. Photocopy of MyKad (both sides)/Passport (for non-Malaysian)
- 2. Form 79/Form 80/Form 80a/Form 83a/Section 562(1)

Declaration and Terms & Conditions

I hereby declare that all of the information and documents provided are true and valid. I have read and understood the contents of this form, and agree to be bound by the Terms & Conditions as stated on www.time.com.my/terms-and-conditions which accompany the subscription of product(s) and/or Service(s).

I consent to the processing of my personal information in accordance with TIME's Privacy Policy at www.time.com.my/privacy-policy.

I agree with the above Declaration and Terms & Conditions.

Signature	:	
Full Name (as per MyKad/Passport)	WONG YU LEE	
MyKad/Passport No.	: 701231 - 10 - 5240	
Date	: 2 3 - 1/1 0 - 2 0 2 1	

Company Stamp				
INK INTEGRATED SDN. BHD. (1326583-P)				

G. FOR OFFICE USE ONLY

Type of Account				
New Account Existing	Account (Ple	ase indicate exist	ing Account No.)	
Sighted Business Signage	Yes	No	Office Nature	
Furniture/Office Automation Equipment	Yes	No	Employee's Nationality 📈 Malaysian 🔲 Non-Malaysian	
Occupied	Ves Yes	No	No. of Staff 8	
			Remarks	
Account Manager:				
Funnel Number:				
Dealer Code:			Dealer Stamp	
Dealer Name:			See Solvin	
Department: Date:			E TIPSPITS 2	
Signature:				