

# TIME FIBRE BROADBAND REGISTRATION FORM

OFFICE EDITION SUBSCRIPTIONS

FIBRE OPTIC COMMUNICATIONS  
1800-18-1818 | WWW.TIME.COM.MY

TIME™

Service Order No: BC422212

## IMPORTANT NOTES

- Please read all the Terms & Conditions accompanying the subscription of the Service(s) before completing this registration form.
- Please write in CAPITAL LETTERS and tick (✓) where applicable.

## A. APPLICANT INFORMATION

Company Name	STRAUMANN GROUP SDN. BHD.			
Registration No.	1349524-P	No. of Staff	10	
Company Type	<input checked="" type="checkbox"/> Sdn. Bhd. <input type="checkbox"/> Bhd. <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Others (Please specify) _____			
Industry	<input checked="" type="checkbox"/> Service <input type="checkbox"/> Retail <input type="checkbox"/> Finance <input type="checkbox"/> F&B <input type="checkbox"/> Public Sector <input type="checkbox"/> Others (Please specify) _____			
Title	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Others (Please specify) _____			
Full Name (as per MyKad/Passport)	Yeo Pueh Nyee			
Designation	Sr.Finance & Operation Specialist			
MyKad/Passport No.	8 3 0 9 1 1 - 1 4 - 5 8 9 6	Nationality	Malaysian	
Email	puehnyee.yeo@straumann.com			
Contact No.		(Office)	0 1 6 - 9 0 0 0 9 0 2	(Mobile)

## B. SERVICE INSTALLATION DETAILS

The representative indicated must be available during the service installation.

<input checked="" type="checkbox"/> Same as the applicant's info in Section A				
Title	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Others (Please specify) _____			
Name				
Designation		Email		
Contact No.		(Office)		(Mobile)

Your installation address

Address	B03-B-15-01, Level 15, KL ECO CITY BO3-B		
	KL ECO CITY JALAN BANGSAR		
City/State	KL ECO CITY / WP Kuala Lumpur	Postcode	5 9 2 0 0
Preferred Installation Date and Time Slot	(1) <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="checkbox"/> Morning / <input type="checkbox"/> Afternoon		
	(2) <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="checkbox"/> Morning / <input type="checkbox"/> Afternoon		
	(3) <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="checkbox"/> Morning / <input type="checkbox"/> Afternoon		

## C. PLAN DETAILS

### TIME Fibre Broadband Office Edition

100Mbps ~~RM248~~ RM218

Terms and conditions apply:  
<https://www.time.com.my/terms-and-conditions/office-edition>

Price(s) subject to Service Tax where applicable.

### Contract Period

24 Months

Balance charges for the remaining contractual months will apply upon early termination.

### Non-Recurring Fee

Deposit : RM 1,000.00

Applicable for foreign-registered company (without SSM registration).

### Included in your plan :

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> 1 Dynamic IP            | <input checked="" type="checkbox"/> 2 Dect Phones                 |
| <input checked="" type="checkbox"/> 2 Voice Lines*          | <input checked="" type="checkbox"/> Wireless AC Dual Band Router  |
| <input checked="" type="checkbox"/> Voice Calls worth RM500 | <input checked="" type="checkbox"/> 100GB TIME BizCloud Storage** |

\*11sen/min for domestic calls and 8sen/min for IDD calls to 60 countries.  
The entitlement of free voice calls worth RM500 must be utilised within 12 months of activation and it is not applicable to numbers beginning with 1-300.

\*\*Valid for 24 months

### Remarks

1 fixed IP (WAN)

## D. BILLING MODE

<input checked="" type="checkbox"/> eBill (default)	<input checked="" type="checkbox"/> Same as the email in Section A	Email	
Or			
<input type="checkbox"/> Paper Bill (monthly fee of RM5)	<input type="checkbox"/> Same as the address in Section B		

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Billing Address

\_\_\_\_\_  
\_\_\_\_\_

City/State

\_\_\_\_\_

Postcode

\_\_\_\_

**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

MasterCard  Visa  Amex

Card Issuer

\_\_\_\_\_

Card No.

\_\_\_\_\_

Name on Card

\_\_\_\_\_

Expiry Date

MM - YY

**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

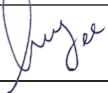
- 1. Photocopy of MyKad (both sides)/Passport (for non-Malaysian)
- 2. Form 79/Form 80/Form 80a/Form 83/Form 83a/Section 562(1)

**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](http://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](http://www.time.com.my/privacy-policy).

I agree with the above Declaration and Terms & Conditions.

Signature : 

Full Name (as per MyKad/Passport) : Yeo Pueh Nyee

MyKad/Passport No. : 830911-14-5896

Date : 05 - 11 - 2021

**Company Stamp**



**G. FOR OFFICE USE ONLY**

**Type of Account**

New Account  Existing Account (Please indicate existing Account No.) \_\_\_\_\_

Sighted Business Signage  Yes  No

Office Nature  Whole Unit  Shared Office  Rented

Furniture/Office Automation Equipment  Yes  No

Employee's Nationality  Malaysian  Non-Malaysian

Occupied  Yes  No

No. of Staff 10

Account Manager: \_\_\_\_\_

**Remarks**

Funnel Number: \_\_\_\_\_

Dealer Code: \_\_\_\_\_

**Dealer Stamp**

PRO ADVANCE  
SOLUTION (002445270-P)

Dealer Name: \_\_\_\_\_

Department: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_