



1/18 Deblin Drive
 NARRE WARREN VIC 3805
 Ph: (03) 8789 4988 FAX: (03) 9705 2544
 E-Mail: sales@gtelecom.com.au

HOME PHONE APPLICATION

Account Holder

Name (Must be same as phone bill):		
Address:		
Suburb:	State:	Postcode:
Phone:	Mobile:	Business:
Fax:	Existing Email Address:	
Driver's License	State:	

Installation

Address:		
Suburb:	State:	Postcode:
Technical Contact Name: Phone:		
Mobile: Fax: Email:		

Billing Details (if different from above)

Address:		
Suburb:	State:	Postcode:
Accounts Contact Name:	Phone:	
Fax:	Email:	

Email Addresses -Log-in& Main Email Address

The username should be no shorter than 3 letters and no longer than 10 letters. Please be advised not all usernames will be available. If your desired preferred username is taken, then the Secondary username will be selected.

1 st Preference*:		@gtelecom.com.au
2 nd Preference*:		@gtelecom.com.au
Password**:		

Additional Email Address (optional)

1 st Preference*:		@gtelecom.com.au
2 nd Preference*:		@gtelecom.com.au
Password**:		

* Username must be 3-15 characters in length and contain only lower case letters or digits. Symbols are not permitted.
 ** Password must be 6-10 characters in length and contain only lower case letters or numbers. Symbols are not permitted.



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Declaration & Authorisation

I declare that: All the information I have provided is true and correct. I have read, understood and agree to abide by GTelecom's Standard form of agreement (SFOA) abbreviated, located on there webpage with the address: <http://sfoa.gtelecom.net.au/>

I am authorized to make this declaration on behalf of the above-named organization.

Signature _____

Position: _____ Date _____

FAX your completed Application to 1300 659 978

This authority is to remain in force in accordance with the terms and conditions as described on this page, and I/we have read and understand the same.

Signature of Account Holder: Date:

Signature of Joint Account Holder (if applicable) :

Date:

Office Use: Staff Members Name:

Office Use Only Date Received: Entered By:

Reference #: