

Phone Plan Direct Debit Request and Authorization

International Economic Plan

Term: 12 Month

Monthly Fee:

\$ 11.32

Unlimited calls to local and long distances within Australia;
Free 200 mins international calls to 5 counties/regions.
Unlimited international calls for first three months for one year contract.

International Unlimited Plan

Term: 12 Month

Monthly Fee:

\$ 16.98

Unlimited calls to local and long distances within Australia;
Unlimited calls to 28 countries and regions
Three months bonus for one year contract.

Global Unlimited plan

Term: 12 Month

Monthly Fee:

\$ 33.98

Unlimited local and long distance calls within Australia
Free calls to Australia Mobile. Free calls to Australian Number starting with 13/1300
Unlimited calls to US/Canada/China/Hong Kong/Taiwan and 20+ countries and regions
Your choice of Australia phone number

Delivery Fee \$10.00

iTalkBB AcclD _____

I/We,

Customer Name _____	Nationality & Passport No. _____	Or Australia Driver License _____
_____	_____	or _____
of address _____	Tel: () _____	() _____
_____ State _____	_____	_____
Suburb _____ Post Code _____	Mobile No. _____	_____
<i>E-Mail</i> _____	Fax () _____	Date of Birth _____

Request and Authorise

iTalk Australia Pty. Ltd. ACN: 135 891 271

or pointed agent to arrange for funds to be debited from my/our nominated account at the financial institution identified below. This authorisation is to remain in force in accordance with the terms described in the Service Agreement.

Signature _____

Date _____

Bank Account or Credit Card to be Debited:

A.. Financial Institution

Bank Name _____	BSB _____	Account No. _____	Account Name _____
I/We authorise:			
1. The PAYEE to verify the details of the above mentioned account with my/our Financial Institution.		Signature _____	_____
2. The Financial Institution to release information allowing the PAYEE to verify the above mentioned account details		Date _____	_____

B.

Credit Card

Type _____ Name on Card _____ Card No. _____

CVV2 _____ Expiry Date _____ Signature _____ Date _____

Acceptance of the Terms & Conditions

By signing this form, I/we acknowledge that I/we have read the attached terms and conditions with this direct debit authorization form, and I/we understand and agree the terms and conditions. Please return the Home phone device to OCCOM when you cancel your home phone service. Thanks for cooperation. One year contract, Early termination fee \$69.99 apply.