



# ONE-CARD-MULTI-NUMBER SERVICE APPLICATION FORM

Personal  Enterprise Application Date(MM/DD/YYYY): \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Subscriber Current Mobile Phone Number \_\_\_\_\_ Subscriber ICCID \_\_\_\_\_  
 China  Taiwan  Hong Kong  Singapore  Thailand  Indonesia  Others  
 New Subscription  Termination  Others \_\_\_\_\_

## A. Applicant Information

Name of Applicant/Company (Print) :	Date of Birth (MM/DD/YYYY):
Personal ID No /Company Reg. No.:	E-Mail:
Second ID: <input type="checkbox"/> IC card <input type="checkbox"/> Driver License <input type="checkbox"/> Residence Permit	Second ID No.: <input type="text"/>
Personal Contact No.(Include Country Code and Area Code):(H)	(O) (Mobile)
Name of Authorized Officer (Print):	Authorized Officer ID: <input type="text"/>
Company Contact Person.:	Contact No.:
	E-Mail :

Permanent address / Company Address (Include Zip/ Postal Code)

Billing Address (Include Zip/ Postal Code)  same as permanent address

## B. Rate Plans

Currency: HK\$

Package	
<input type="checkbox"/> HK\$168 goLocal Basic (3 Local Numbers in TW, HK, China)	<input type="checkbox"/> HK\$688 goLocal Plus(3 local Numbers in TW, HK, China)
<input type="checkbox"/> TW : +886	<input type="checkbox"/> HK : +852
<input type="checkbox"/> Singapore : +65	<input type="checkbox"/> Thailand : +62
	<input type="checkbox"/> China : +86
	<input type="checkbox"/> Indonesia : +62

## C. One Time Charges/Others

<input type="checkbox"/> Activation Fee : _____	<input type="checkbox"/> Deposit : _____	<input type="checkbox"/> Number Selection Fee: _____
<input type="checkbox"/> Lucky Number Fee : _____	<input type="checkbox"/> SIM Card Fee : _____	<input type="checkbox"/> Number Change Fee : _____

## D. Value-Added Service

Fwd to S2T (Please choice the number you hope to forward to your S2T mobile phone number)	Fwd to home (Forward to your VLN to your home mobile phone number.)
1. _____	1. _____
2. _____	
3. _____	

## E. Credit Card Information

Card Type : <input type="checkbox"/> VISA <input type="checkbox"/> MASTER	Issuing Bank : _____
Name of Cardholder : _____	Card Number : <input type="text"/>
Expiration Date : Month <input type="text"/> <input type="text"/> Year <input type="text"/> <input type="text"/>	Security Code <input type="text"/> <input type="text"/> <input type="text"/>
<input type="checkbox"/> Yes. Being the SIM cardholder of Sim2Travel (S2T), by signing below I have double checked the entries I have made, and hereby understand and agree to the terms set forth in this agreement. I specifically authorize the total S2T monthly bill to be charged to the credit card number that I have entered. If the card presented above is denied, S2T has the right to terminate the service at any time. I further agree that in the event my credit card becomes invalid, I will provide S2T with a new valid credit card upon request, to be charged for the payment of any outstanding balances owed to S2T.	Cardholder's Signature  DATE (MM/DD/YYYY): Same as credit card

## F. Signature of Applicant

<input type="checkbox"/> I/We agree to be bound by S2T Terms & Conditions of Service relating to cell phone service.
Signature: _____
DATE (MM/DD/YYYY): _____

## G. For Official Use Only

Received On:	Checked & Verified By
Service Activation Date :	
Remark	

Please return completed form and fax to +886-2- 2546-2027 or scan & mail to [CRM@sim2Travel.com](mailto:CRM@sim2Travel.com)