Order Form Biznet BGP

|  |  |
| --- | --- |
| **Note:** Please provide detailed information so we can provision the service faster. Please scan & email the Order Form, or fax to +62-21-5700580. | **Sales Code** |

# Customer Information

|  |  |
| --- | --- |
| **Customer ID:** | |
| **Customer Name / Company Name(NPWP/Tax Name):** | |
| Country : | State : |
| City : | District : |
| Subdistrict : | Postal Code : |
| Building Name : | Address : |
| **Customer Main Contact Info** | |
| First Name: | Last Name: |
| Phone : | Mobile : |
| Email : | Title : |

# Network Information

|  |  |
| --- | --- |
| Billing Address: | |
| AS Number |  |
| Router IP address |  |
| Routes to be announced |  |
| Routes to be received | Full Route  Default Route  Other (please specify) |

# Equipment Information

|  |  |
| --- | --- |
| Router Type |  |
| Router interface card |  |
| Memory |  |
| OS Version |  |

# Additional Information

|  |
| --- |
| (Please specify in detail)  International Only  International + Local - Mix  Other details: |

# Authorization

|  |  |
| --- | --- |
| Signature & Company Stamp | Print Name: |
| Date: |