Order Form Biznet BGP

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| --- | --- |
| **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 - MixOther details:  |

# Authorization

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