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

|  |  |
| --- | --- |
| Company Name/Customer Name: | |
| Address : | |
| Contact Person |  |
| Contact Title |  |
| Phone |  |
| Fax |  |
| Mobile |  |
| Email |  |

# Billing 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: |