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 - MixOther details:  |

# Authorization

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