

in association with

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## NETWORK SERVICES ORDER FORM

Reference Customer Address: Postcode Tel Fax Contact				Billing Address Tel Email	Postcode					Focus 4 U Ltd St Joseph's Close Hove BN3 7ES Tel: 0870 7707165 Fax: 0870 7707164 Email: sales@focus4u.co.uk			
				alanhana Numh		Postcod		1	2	3	CPS	LR	
			Te	elephone Numb		Posicou	e	-	2	3	CF3		
1. Total Nun 2. Type of Li		ines on this no.											
A=Analogue       B=ISDN 2 + MSN         C=ISDN 2 + DDI       D=ISDN 30         E=Featureline       F=Fax         G=Highway       H=Redcare         3. Additional BT Services         A=Call Diversion       B=Caller Display         C=Call Minder       D=Call Sign         E=Ring Back       F= Meter Pulse         G=Call Waiting       H=Bypass Number         J=Call Barring Local       K=Call Barring International         M=Call Barring Premium Rate       Image: Call Sign         Telephone System       Image: Call Sign         System Maintainer       Image: Call Sign							Agent Tariffs (L=34) Paper	Itemisati	ion				
Notes								Summary Email Itemisat Minimum Term (in months)			ion		
Custome	er Auth	orisation											
Print Name	e					Position							
Signature						Date							
I have read,	, understa	and and accept the ter	rms and con	ditions of this o	order printed of	overleaf.	L					]	