

# Customer Registration Form

Date: \_\_\_\_\_

**Data Centre Location:** Please put "✓" to the appropriate box

 ONE (Kwun Tong)   
  JUMBO (Tsuen Wan)   
  MEGA-i (Chai Wan)   
  MEGA Two (Fotan)

**Registration Information (FULL NAME & IN BLOCK LETTER)**
**Part A - Company Information**

 Company Name (Full name) \_\_\_\_\_  
 Correspondence Address \_\_\_\_\_  
 Billing Address \_\_\_\_\_  
 Company Telephone No. \_\_\_\_\_  
 Company Fax No. \_\_\_\_\_

**Part B - Contact Information**

(1)	Name * _____	English Name _____	(If any)
	Email _____	Tel _____	
***Contact Type: <input type="checkbox"/> Person-in-Charge <input type="checkbox"/> Maintenance <input type="checkbox"/> Emergency <input type="checkbox"/> 3 <sup>rd</sup> party authorization <input type="checkbox"/> Billing <input type="checkbox"/> e-Invoice <input type="checkbox"/> Cabling			
(2)	Name * _____	English Name _____	(If any)
	Email _____	Tel _____	
***Contact Type: <input type="checkbox"/> Person-in-Charge <input type="checkbox"/> Maintenance <input type="checkbox"/> Emergency <input type="checkbox"/> 3 <sup>rd</sup> party authorization <input type="checkbox"/> Billing <input type="checkbox"/> e-Invoice <input type="checkbox"/> Cabling			
(3)	Name * _____	English Name _____	(If any)
	Email _____	Tel _____	
***Contact Type: <input type="checkbox"/> Person-in-Charge <input type="checkbox"/> Maintenance <input type="checkbox"/> Emergency <input type="checkbox"/> 3 <sup>rd</sup> party authorization <input type="checkbox"/> Billing <input type="checkbox"/> e-Invoice <input type="checkbox"/> Cabling			
(4)	Name * _____	English Name _____	(If any)
	Email _____	Tel _____	
***Contact Type: <input type="checkbox"/> Person-in-Charge <input type="checkbox"/> Maintenance <input type="checkbox"/> Emergency <input type="checkbox"/> 3 <sup>rd</sup> party authorization <input type="checkbox"/> Billing <input type="checkbox"/> e-Invoice <input type="checkbox"/> Cabling			
(5)	Name * _____	English Name _____	(If any)
	Email _____	Tel _____	
***Contact Type: <input type="checkbox"/> Person-in-Charge <input type="checkbox"/> Maintenance <input type="checkbox"/> Emergency <input type="checkbox"/> 3 <sup>rd</sup> party authorization <input type="checkbox"/> Billing <input type="checkbox"/> e-Invoice <input type="checkbox"/> Cabling			

\* Name must match with HKID card / Passport

**\*\*\* Classification of Different Types of Registered Contacts: (More than 1 contact type can be chosen for 1 registered person)**

		Contract Expiry & overdue payment issue notification	Add/remove Contacts of (1) - (7)	Authorize Third-party to access datacentre	Access Datacentre & Raise Remote-hand Request	Emergency Incident Notification
1	Person-in-charge	Yes	Yes	Yes	Yes	2nd choice
2	Maintenance Contact	No	No	No	Yes	2nd choice
3	Emergency Contact	No	No	No	Yes	1st choice
4	3rd Party Authorization	No	No	Yes	No	No
5	Billing Contact	The contact to which invoices and other billing related notices will be sent. If not registered, Invoices are sent to 'Accounts Department'.				
6	E-Invoice	The contact to receive invoices by email				
7	Cabling Contact	For MEGA-iAdvantage only. The contact who can raise cabling order, and receive cabling notices, eg A-end connects to B-End.				

**Authorized Signature / Company Chop**

 Please fax back or email to our Customer Service Department  
 Hotline: (852) 2208 8800  
 Fax No. (852) 2505 8047  
 Email: [cs@iadvantage.net](mailto:cs@iadvantage.net)