



Contract number: \_\_\_\_\_

## Order form

By signing this form, you confirm the order for the registration of the following telephone numbers by Call Factory in the name of your company, as well as the setup and connection of these numbers.

### I WOULD LIKE TO REGISTER AND ACTIVATE THE FOLLOWING NUMBERS THROUGH CALL FACTORY

1. \_\_\_\_\_

2. \_\_\_\_\_

### CUSTOMER DETAILS

Company name

(when registering as a company) \_\_\_\_\_

First name / Last name

m\* \_\_\_\_\_

f\* \_\_\_\_\_

Mail address \_\_\_\_\_

Postal code / City \_\_\_\_\_

Invoice address

(if different from mail address) \_\_\_\_\_

Invoice postal code / City \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

Reference \_\_\_\_\_

\* Tick where applicable

1/4

**Address:**

Parkstraat 83  
2514 JG The Hague  
The Netherlands

**Contact:**

**Tel:** +31 70 3111050  
**Email:** customerservice@callfactory.eu  
**Web:** [www.callfactory.eu](http://www.callfactory.eu)

**Do you have questions?**

Email us at [customerservice@callfactory.eu](mailto:customerservice@callfactory.eu).  
Please include your contract number.

## Order form

Into what bank account should payouts of Premium rate numbers be made?

IBAN \_\_\_\_\_

BIC \_\_\_\_\_

### CONNECTION DETAILS

Please fill out your ring-to numbers where incoming calls should be redirected.

- |    |  |                 |  |
|----|--|-----------------|--|
| 1. |  | ring-to number: |  |
| 2. |  | ring-to number: |  |

For freephone numbers: do you want to accept calls from mobile callers?    yes\*     no\*

For Premium rate numbers: what tariff would you like to use? \_\_\_\_\_

Desired contract duration    1 yr\*     2 yrs\*     3 yrs\*

### ADDITIONAL SERVICES / REMARKS

\*Tick where applicable

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By signing this order form, I indicate that I have read and agree to the terms of service as provided by Call Factory and confirm my order of the registration of above mentioned telephone numbers by Call Factory in my name through relevant authorities.

Name \_\_\_\_\_

City \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

**THANK YOU FOR YOUR ORDER. PLEASE DO NOT HESITATE TO CONTACT US IF YOU HAVE QUESTIONS.**

Please fill out, scan and email this form to [customerservice@callfactory.eu](mailto:customerservice@callfactory.eu)



Contract number: \_\_\_\_\_

## Direct Debit Mandate

Name \_\_\_\_\_

Address \_\_\_\_\_

Postal code / City \_\_\_\_\_ Country \_\_\_\_\_

Incassant ID \_\_\_\_\_

Authorization reference \_\_\_\_\_

By signing this mandate form, you authorise \_\_\_\_\_  
to send instructions to your bank to debit your account and

\_\_\_\_\_ your bank to debit your account in accordance with the instructions from

\_\_\_\_\_ You are not entitled to a refund from your bank after your account has been debited, but you are entitled to request your bank not to debit your account up until the day on which the payment is due. Your rights are explained in a statement that you can obtain from your bank.

Name \_\_\_\_\_

Address \_\_\_\_\_

Postal code / City \_\_\_\_\_ Country \_\_\_\_\_

Bank account (IBAN) \_\_\_\_\_

Bank Identifier (BIC) \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_