

CHANGE OF SERVICE FORM

EXISTING CUSTOMERS ONLY



CUSTOMER DETAILS

Customer Name: _____ Account Number: _____
ID# _____ Date: _____ Email: _____
(please attach copy)
Telephone (Cell) _____ (Work) _____

LOGIC TV

- Change TV Package from (existing) _____ to (new) _____
- Upgrade TV Set Top Box Fee CI\$ _____
- Downgrade TV Set Top Box Fee CI\$ _____
- Cancel TV Set Top Box # of Boxes _____ Fee CI\$ _____
- Add TV Set Top Box in another room at the same location. Explain: _____
_____ Fee CI\$ _____
- Add/Remove additional TV Package. - Name of package _____

Effective date for change _____ New Monthly Fee CI\$ _____

NOTES: _____

LOGIC PHONE

- Change Phone Package from (existing) _____ to (new) _____

Please note: Changes to phone plans can not be completed until the end of the current billing cycle (27 of each month). All charges billed to the account will appear on the next billing cycle and are due by the 20th day of the next month.

- Add overseas number Area code requested _____ Fee CI\$ _____

Effective date for change _____ New Monthly Fee CI\$ _____

NOTES: _____

LOGIC INTERNET

- Change Internet Package from (existing) _____ to (new) _____

Change fee CI\$ _____

Effective date for change _____ New Monthly Fee CI\$ _____

NOTES: _____

ACCOUNT CHANGES

- Transfer all services to new physical address at: _____ Fee CI\$99
- Reactivate LIMBO account. Date: _____
- Move account to LIMBO Status. Date: _____ Fee CI\$10p/m
- Change of email address _____
- Change of Mailing address _____
- Update CI Debit or Credit Card number to _____

Customer Signature: _____ Verified By: _____
Date: _____ Date Completed: _____
Rep. Name _____ Notes: _____