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| **Schedule A- ORDER FORM MELITA LIMITED**  **ORDER FORM REFERENCE NUMBER CO41/21**  **Provision of Data Connectivity Services for the Malta Public Service** | | | | |
| **CUSTOMER DETAILS *(Purchaser)*** | | | | |
| Billing address |  | | | |
| Delivery Address *(if different to Billing address)* | | | | |
| **SERVICES** | | | | |
| **Service Name** | **Number of Connections** | **Full Monthly Fee excl. VAT / connection** | **Free handset** | **Effective Service Date / Delivery date** |
| Melita Local Home Data SIM |  | €12.50 | Samsung A32 |  |
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| Notes: This Order Form shall be deemed to form part of the Contract bearing reference C041/21 and shall be regulated by the terms and conditions and annexes therein.  The Service(s) shall be valid for a minimum term of twenty-four (24) months (“Initial Term”), each commencing from the Effective Service Date/ Delivery Date specified above. | | | | |
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| **CUSTOMER AGREEMENT** | | | | |
| **Term** | | **24 months / month on month** | | |
| **Name of Authorized Signatory** | |  | | |
| **Title** | |  | | |
| **Signature** | |  | | |
| **Date of Signature** | |  | | |

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| The filled-in Form is to be sent via email to [**rachel.buhagiarvassallo@melitaltd.com**](mailto:rachel.buhagiarvassallo@melitaltd.com) and [**sales@melitabusiness.com**](mailto:sales@melitabusiness.com). The Form will be signed by the Authorized Signatory upon delivery of the device/s. |