

SERVICE REGISTRATION FORM



- For Existing Customer, please fill up Section A, B, E, F and G (Skip Section C)
- For New Customer, please fill up Section A, C, E, F and G (Skip Section B)
- For supporting documents, please follow the latest supporting documents requirements that that effect on 01-JUN-2019
- **For the column with dropdown function, please use the dropdown function. DO NOT write manually.**
- Please fill in PIC **full name** in the Receiver Detail

- To be filled-in
- Dropdown selection
- Auto-populated



A. ORDER DETAILS

*Account Type	<input type="text" value="Corporate Official"/>	*AM/CM Name	<input type="text" value="LOH KEN JACK"/>
*Segment Code	<input type="text" value="40"/>	*AM/CM-ID	<input type="text" value="NTH00072"/>
*Roadshow/ Onsite	<input type="text" value="No"/>	**Dealer Code	<input type="text" value="NTH50361"/>
*Registration Type	<input type="text" value="NEW - Corporate Official"/>	*User ID	<input type="text" value="S001928948"/>
*Penalty Identifier	<input type="text" value="Plan and Bundled Device"/>		<i>(User ID for Partner Portal/ Sales Portal)</i>
*Nature of Business	<input type="text" value="COR - Manufacturing"/>		** Dealer Code mandatory for Dealer Only

B. FOR EXISTING CUSTOMER (CORPORATE OFFICIAL/ CORPORATE EMPLOYEE)

*Company Name	<input type="text"/>	*BRN No.	<input type="text"/>
*Customer First Name	<input type="text"/>	*Contact No.	<input type="text"/>
*Customer Last Name	<input type="text"/>	*Email	<input type="text"/>
*Customer ID Type	<input type="text"/> No. <input type="text"/>		<i>50 characters only</i>

BILLING ADDRESS

*Address Type	<input type="text"/>	*Street Type	<input type="text"/>
*Unit No.	<input type="text"/>	Section/ Area	<input type="text"/>
*Floor No.	<input type="text"/>	*City	<input type="text"/>
*Building Name	<input type="text"/>	*Postcode	<input type="text"/>
*Street Name	<input type="text"/>	*State	<input type="text"/>

C. FOR NEW CUSTOMER (CORPORATE EMPLOYEE)

*Company Name	<input type="text"/>	*BRN No	<input type="text"/>
*Salutation	<input type="text"/>	*Race	<input type="text"/>
*Customer First Name	<input type="text"/>	*Gender	<input type="text"/>
*Customer Last Name	<input type="text"/>	*Nationality	<input type="text"/>
*Customer ID Type	<input type="text"/> No. <input type="text"/>	*DOB (DDMMYY)	<input type="text"/>
*Contact No.	<input type="text"/>	*E-mail	<input type="text"/>
*Mother's Maiden Name	<input type="text"/>		<i>50 characters only</i>

BILLING ADDRESS

*Address Type	<input type="text"/>	*Street Type	<input type="text"/>
*Unit No.	<input type="text"/>	Section/ Area	<input type="text"/>
*Floor No.	<input type="text"/>	*City	<input type="text"/>
*Building Name	<input type="text"/>	*Postcode	<input type="text"/>
*Street Name	<input type="text"/>	*State	<input type="text"/>

D. FOR NEW CUSTOMER (CORPORATE OFFICIAL)

*Company Name	<input type="text"/>	*BRN No	<input type="text"/>
Authorised/Paid Up Capital	<input type="text"/>	Nature of Business	<input type="text" value="COR - Manufacturing"/>
*Customer ID Type	<input type="text"/> No. <input type="text"/>		

AUTHORISED SIGNATORY DETAILS

Name	<input type="text"/>
Designation	<input type="text"/>
Contact No. (Office)	<input type="text"/>
Email	<input type="text"/>

CONTACT PERSON FOR ENQUIRIES

Name	<input type="text"/>
Designation	<input type="text"/>
Contact No.	<input type="text"/>
Email	<input type="text"/>

REGISTERED ADDRESS


Address Type	<input type="text"/>	Street Type	<input type="text"/>
Unit No.	<input type="text"/>	Section/ Area	<input type="text"/>
Floor No.	<input type="text"/>	*City	<input type="text"/>
Building Name	<input type="text"/>	*Postcode	<input type="text"/>
Street Name	<input type="text"/>	*State	<input type="text"/>

CUSTOMER'S INITIAL

BILLING ADDRESS

Follow Registered Address?	<input type="text"/>		
Address Type	<input type="text"/>	Street Type	<input type="text"/>
Unit No.	<input type="text"/>	Section/ Area	<input type="text"/>
Floor No.	<input type="text"/>	City	<input type="text"/>
Building Name	<input type="text"/>	*Postcode	<input type="text"/>
Street Name	<input type="text"/>	*State	<input type="text"/>

E. BILLING PREFERENCE

*Language	<input type="text"/>	FOR AUTO PAYMENT  <i>Eligible for card issued by local Banks. Original authorization letter by the credit cardholder is required for third party credit card submission.</i>	Credit Card Type	<input type="text"/>
*Bill Type	<input type="text"/>		Credit Card No.	<input type="text"/>
*Bill Cycle	<input type="text"/>		Issuing Bank	<input type="text"/>
*Bill Media	<input type="text"/>		Name on Credit Card	<input type="text"/>
			Expiry date (MM / YY)	<input type="text"/> / <input type="text"/>

F. DECLARATION/ DISCLOSURE BY CUSTOMER

I hereby declare that :

- The information given above is true and accurate to the best of my knowledge and additional information/ documentation will be provided as and when requested by Celcom
- I am not a declared bankrupt nor is there any proceeding of the same nature being initiated against me
- I have read, understood and agree to be bound by the respective Terms and Conditions for each service and am liable for all fees and charges incurred for the respective service
- I have read, clearly understood and agree to the aforesaid Terms and Conditions as stated on Celcom's website at www.celcom.com.my
- By executing the Registration Form or by continuing to use the service, I am giving consent to Celcom that the information collected by Celcom from me ('Personal Information') will be used and /or disclosed in accordance to Celcom's Privacy Notice as posted on its website at (<https://www.celcom.com.my/personal/policy>) and Data Protection Act 2010.
- I agree to read Celcom's Privacy Notice to understand my right with regards to my Personal Information

Signature	Date	Time	Company Stamp and Business Registration Number
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G. FOR OFFICE USE ONLY > FILL IN BY DEALERS/ AM/ CM**DEVICE PAYMENT INFORMATION - APPLICABLE ONLY FOR PLAN WITH DEVICE, PLEASE FILL IN ACCORDINGLY**

Company Name	<input type="text"/>	BRN No	<input type="text"/>
SO Type	<input type="text"/>	Batching No.	<input type="text"/>
PO/ Memo No.	<input type="text"/>	SAP IO Region	<input type="text"/>
Receipt No.	<input type="text"/>	SAP IO No.	<input type="text"/>


DEVICE DELIVERY

Device Delivery Address	<input type="text"/>	Contact No.	<input type="text"/>
Receiver Name	<input type="text"/>		

ALTERNATE DEVICE DELIVERY ADDRESS

Address Type	<input type="text"/>	Street Type	<input type="text"/>
Unit No.	<input type="text"/>	Section/ Area	<input type="text"/>
Floor No.	<input type="text"/>	City	<input type="text"/>
Building Name	<input type="text"/>	*Postcode	<input type="text"/>
Street Name	<input type="text"/>	*State	<input type="text"/>

H. SERVICE VERIFICATION

Foreigner Upfront Deposit Waived?	<input type="text"/>	Upfront Payment Method	<input type="text"/>	ROBOTIC MARKER - DO NOT DELETE! 
Credit Treatment Code	<input type="text"/>	Servicing Code	<input type="text"/>	Promo Code <input type="text"/>

Verifier's Name	 Signature	Date	NTH50361 Setia Budi venture <small>(PG2016472-K)</small> 1-12 Mayang Mall, Jalan Mayang Paair 1 Bayan Baru, 11960 Penang email: setiabudiventure@gmail.com Tel Support: 012 916 8888 Celcom Business Associates's Stamp
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M2M PACKAGE AND SPEED SELECTION

NOTE: 2G SIM - GPRS up to 128kbps / 3G SIM - 3.5G up to 21Mbps

PACKAGE	SIM SPEED
M2M-5 – Data Only (With SMS)	
M2M-5 – Data Only (W/O SMS)	
M2M-8 – Data Only (With SMS)	
M2M-8 – Data Only (W/O SMS)	
M2M-8 – Voice and Data	
M2M-15 – Data Only (With SMS)	
M2M-15 – Data Only (W/O SMS)	
M2M-25 – Data Only (With SMS)	
M2M-25 – Data Only (W/O SMS)	
M2M-25 – Voice and Data	
M2M-35 – Data Only (With SMS)	
M2M-35 – Data Only (W/O SMS)	
M2M-35 – Voice and Data	
M2M-50 – Data Only (With SMS)	

PACKAGE	SIM SPEED
M2M-50 – Data Only (W/O SMS)	
M2M-50 – Voice and Data	
M2M-138 Data Only (W/O SMS)	
M2M-180 Data Only (W/O SMS)	
M2M-220 Data Only (W/O SMS)	
M2M-250 Data Only (W/O SMS)	
M2M-500 - Voice and Bulk Data	
M2M-500 - Bulk Data Only	
M2M-1200 - Voice and Bulk Data	
M2M-1200 - Bulk Data Only	
M2M SMS FLAT	

M2M + LTE ROUTER
 200GB + HUAWEI H1 B618 LTE ROUTER

M2M LTE ROUTER SERIES – H1	
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M2M ADD-ON SERVICES

ADD-ON SERVICE		SELECTION																			
Default APN	APN: m2m.celcom.net.my		- Simcard's IP will be re-cycled (Dynamic) and shared with other M2M users - ABLE to browse internet																		
Dedicated APN	Access Point Name		(max 12 alphanumeric character ONLY- 1 word)																		
	Private Dynamic IP		- Simcard's IP will change, within specific range - NOT ABLE to browse internet																		
	Private Fixed IP		- Simcard's IP will retain, within specific range - NOT ABLE to browse internet																		
Private Fixed IP	IP Blocks	<table border="1"> <thead> <tr><th># Block</th><th>IP</th></tr> </thead> <tbody> <tr><td></td><td>4 IP</td></tr> <tr><td></td><td>8 IP</td></tr> <tr><td></td><td>16 IP</td></tr> <tr><td></td><td>32 IP</td></tr> </tbody> </table>	# Block	IP		4 IP		8 IP		16 IP		32 IP	<table border="1"> <thead> <tr><th># Block</th><th>IP</th></tr> </thead> <tbody> <tr><td></td><td>64 IP</td></tr> <tr><td></td><td>128 IP</td></tr> <tr><td></td><td>256 IP</td></tr> </tbody> </table>	# Block	IP		64 IP		128 IP		256 IP
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	8 IP																				
	16 IP																				
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Public Fixed IP	APN: im2m		- Simcard's IP will change, within specific range - ABLE to browse internet																		
M2M Top Up	Monthly recurring (to enable at Combo Package)	<table border="1"> <thead> <tr><th>SELECTION</th><th>PACKAGE</th></tr> </thead> <tbody> <tr><td></td><td>M2M TOP UP (10MB) Auto Renew</td></tr> <tr><td></td><td>M2M TOP UP (100MB) Auto Renew</td></tr> <tr><td></td><td>M2M TOP UP (500MB) Auto Renew</td></tr> <tr><td></td><td>M2M TOP UP (1GB) Auto Renew</td></tr> </tbody> </table>	SELECTION	PACKAGE		M2M TOP UP (10MB) Auto Renew		M2M TOP UP (100MB) Auto Renew		M2M TOP UP (500MB) Auto Renew		M2M TOP UP (1GB) Auto Renew	M2M Top Up (One Off) products can only be subscribed via Self Care Portal								
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	M2M ROAMING PPU																				

M2M SIM REQUEST

SIM TYPE	SIM SUB-TYPE	QUANTITY
2G SIM	MINI	
3G USIM	MINI	
	MICRO	

NOTE:
 - Buffer SIM (blank) for MCS Self-Care Portal registration (1st time)
 - Additional request can be made from inside MCS Self-Care Portal
 - "MINI" SIM type is full sized SIM, "MICRO" SIM type is 2-in-1 or 3-in-1 SIM

M2M SELF-CARE ACCOUNT CREATION

LOGIN ID - MAIN

Name _____

 Designation _____
 Office Number _____
 Mobile No _____
 Email _____

LOGIN ID - ADDITIONAL

Name _____

 Designation _____
 Office Number _____
 Mobile No _____
 Email _____

Customer's Initial _____