



SERVICE APPLICATION FORM

Fill out the corresponding form of your chosen type of plan only.

For EMAIL applications:

Scan and attach along with other requirements in one **pdf file format** only.

Please limit your application file to 3-5 pages if possible. Submit to

enterpriseextension@smart.com.ph

 Tablet Plans (Page 2-3)

 BYOD Sim only Plan (Page 4-5)

REQUIREMENTS CHECKLIST
(For email applications: EnterpriseExtension@smart.com.ph)

- Complete Form Company ID (Front and Back)
 Gov't ID with signature (if company ID does not reflect employee signature)
 Endorsement Letter From HR indicating **Tenure and Communication Allowance**
 SOA or Statement of Commission



SERVICE APPLICATION FORM
ENTERPRISE EXTENSION

New Connect Retention

This field is for Retention only
Mobile Number: _____

Employee #: _____

Fill in all the required information. Do not leave an item blank.

If item is not applicable, indicate "N/A"

Kindly write legibly and countersign any erasures.

***Required** **SUBSCRIBER INFORMATION**

SUBSCRIBER NAME: (Last Name/ First Name/ Middle Name)

BIRTHDATE: (MM/DD/YYYY)

RESIDENCE TEL. NUMBER:

BUSINESS NUMBER:

MOBILE NUMBER: *

ACTIVE EMAIL ADDRESS: (default e-SOA email address)*

COMPANY/BUSINESS NAME:

Position Title:

Shade or Mark (x, ✓) Your Preferred Postpaid Kit Delivery Address: Business Residence

BUSINESS ADDRESS (Building,Street,Baranggay,City/Province/Zip Code): *Required

RESIDENCE ADDRESS (Building,Street,Baranggay,City/Province/Zip Code): *Required

PLAN DETAILS	PLAN 1500	PLAN 1500
Quantity		
Device	Samsung Tab S5e	Samsung Tab A 8"
Amortization	200	FREE
Data Allocation	NON STOP SURF	NON STOP SURF
SMS (All Net)	UNLI	UNLI
Calls to Smart, Sun & TNT	UNLI	UNLI
Calls to All Network	100 Minutes	100 Minutes
CONTRACT TERM in MONTHS	24 Months	24 Months

Notes:

NEAREST RELATIVE INFORMATION

RATES (VAT inc.)

Name	3G
Relationship	Php 2.50/15 mins.
Address:	LTE
Mobile Number:	Php .05/KB
Landline:	

I affirm that the above given information and supporting documents are true and correct. I understand that I may be requested to submit requirements to facilitate the processing of this application. I signify agreement to the above provisions, **TERMS AND CONDITIONS** and the e-SOA set forth, found in this application form.

Subscriber's Signature over Printed Name/ Date Signed

