



MNS
MAURITIUS NETWORK SERVICES

Mauritius Network Services Ltd | Silicon Avenue, Cybercity, Ebene, 72201, Republic of Mauritius
T: (230) 401 6800 | F: (230) 401 6801 | Email: mnsmail@mns.mu | https://mns.mu
VAT REG No: VAT20130192 | BRN: C07012581
Customer Service
T: (230) 401 6805 | F: (230) 401 6802 | Email: customer.service@mns.mu
Helpdesk
T: (230) 401 6825 | Email: helpdesk@mns.mu

SUBSCRIBER – ACCOUNT REGISTRATION FORM

Ref: ACCT-REG-01

System: PDMS, TN Phase III-FS, TN Phase III -FM, TN Phase VI, FOTS, MCCI, TLINK, WMS, EAR

Please specify system from the above list. _____

1. SUBSCRIBER DETAILS

Company name: _____

Address: _____

Tel: _____ Fax: _____

Company BRN: _____ WMS Code: _____

VAT Registered: YES NO VAT Registration No: _____

Would you like your invoices to be emailed: YES NO Billing Email: _____

Billing contact person: _____

2. AUTHORISED SIGNATORIES - CONTACT PERSONS

2.1 MAIN CONTACT PERSON

First Name: _____ Last Name: _____

Tel: _____ Fax: _____ Email: _____

Job Title: _____ Signature: _____

2.2 ALTERNATE CONTACT PERSON

First Name: _____ Last Name: _____

Tel: _____ Fax: _____ Email: _____

Job Title: _____ Signature: _____

3. USERS

3.1 GENERAL USER (1)

First Name: _____ Last Name: _____

Tel: _____ Fax: _____ Email: _____

Job Title: _____ Department: _____

Signature: _____



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3.2 GENERAL USER (2)

First Name: _____ Last Name: _____
Tel: _____ Fax: _____ Email: _____
Job Title: _____ Department: _____
Signature: _____

3.3 GENERAL USER (3)

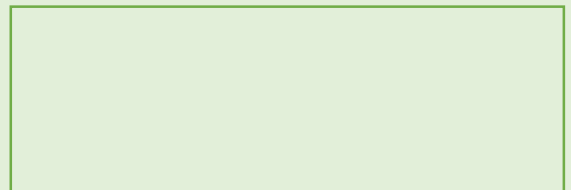
First Name: _____ Last Name: _____
Tel: _____ Fax: _____ Email: _____
Job Title: _____ Department: _____
Signature: _____

Please provide ONLY email address created for you by your employer. We strongly recommend that you do NOT provide email addresses used by a group, or created by yourself for your personal use, such as under Gmail, Yahoo, Hotmail,...etc. Using your personal email presents security risks to the company/business information, and personal email accounts may not be covered by your company's security policies.

4. I CERTIFY THAT ALL THE ABOVE INFORMATION GIVEN ARE CORRECT AND TRUE

First Name: _____
Last Name: _____
Job Title: _____
Date: _____
Signature: _____

Official seal



Notes

- WMS code. This field must be completed for Warehouse Management System.
- Section 2.1 and 4.1 must be completed by the Director, Partner, Owner or Proprietor only.
- Please submit a copy of VAT/ BRN certificate if applicable.
- Login credentials will be sent to the users respectively.
- All correspondence will be addressed to authorised signatories only.
- Any future change request must be authorised by the main /alternate signatories only.

By providing the above personal data, I consent to the collection, processing and retention of such personal data by Mauritius Network Services Ltd, for the purposes of using the services that have been subscribed. All personal data shall be collected and processed in accordance with the Data Protection Act.