

# SERVICE AGREEMENT



Subscription Date \_\_\_\_\_

Type of Account  Personal  Business

Sales Agent Name \_\_\_\_\_ Sales Agent Phone Number \_\_\_\_\_

Personal Account	Business Account
Name	Company Name
Address	Attention
City/State/Zip	Address Line 1
Home Phone No.	Address Line 2
Fax No.	City/State/Zip
Birthdate      Mo.      Day      Yr	Business Phone No.
Social Security No.	Fax No.
Drivers Lic. No.	Federal Tax ID

## Services & Features

**Term** (Check One): **Fixed:**  12 mos.  18 mos.  36 mos. **Non-Fixed:**  Monthly  Quarterly

**Colocation Hosting:**  Yes  No  Cageless - Rack Units \_\_\_\_\_  Cabinet  Cage

**Hosting** (Check One):  Dedicated  Virtual w/ 5GB Transfer  Virtual w/ 15GB Transfer  Other

**Equipment:**  Lease  Purchase  None

Midas Networks Eqpt ID. \_\_\_\_\_ Desc. \_\_\_\_\_

Price \$ \_\_\_\_\_ /month

**Managed Services:**  Backup  Firewall Protection  VPN Solution  Custom (explain in remarks)

**Price:** \_\_\_\_\_

Install \$ \_\_\_\_\_

Zip Code \_\_\_\_\_ Tax \$ \_\_\_\_\_

Begin Service Amount \$ \_\_\_\_\_

Total for Monthly Plan \$ \_\_\_\_\_ +Tax

Special Promotions/Remarks \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## PAYMENT

Method of Payment:  Check  Credit Card

Credit Card Information:  MC  Visa \_\_\_\_\_ Credit Card No. \_\_\_\_\_

Exp. Date \_\_\_\_\_ Authorization No. \_\_\_\_\_ 3 digit Security Code \_\_\_\_\_

Automatic payment from Credit Card: Please charge my monthly Midas Network Service fees to my credit card. By signing, I authorize Midas Networks to debit my credit card in accordance with paragraph 13 of the Terms and Conditions.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

IMPORTANT NEW CUSTOMER INFORMATION

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- You may have selected a plan with a Fixed Term of Service. Our Fixed Term plans are subject to an early termination fee equal to ½ of the remaining balance on the contract.
- The first month's payment will be due upon signing of the document and may be prorated for the number of days you are actually on Service during the first month.
- There will be a one-time setup fee to establish connectivity with our network.

**CUSTOMER ACCEPTANCE (REQUIRED)**

By signing below, you acknowledge you are of legal age, have provided true and complete information, have received a copy of the agreement and, if signing or subscribing on behalf of a corporation or other entity, are fully authorized to sign on behalf of or legally bind such entity. In the event of unauthorized signature on behalf of a corporate customer, you agree to be personally liable for the amounts not paid when due. You also acknowledge you have received and reviewed the Midas Networks Inc. Term and Conditions, and agree to be bound by them. You understand you are subject to ½ of the remaining balance on you account if terminated early. Midas Networks Inc. makes no warranties, express or implied, regarding the Service or Equipment, and our liability is limited in accordance with Paragraph 15 of the Midas Networks Terms and Agreements and as permitted by applicable law.

Signature: \_\_\_\_\_ Title (Required for Business Accounts): \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_