

## HKT Billing Change Request Form

### Section A: Customer Information & Change Requests *(please complete all fields and return by fax to 10033)*

Company Name ("Customer"): \_\_\_\_\_

Business Registration No: \_\_\_\_\_

Contact Person (name & title): \_\_\_\_\_ Contact Tel No: \_\_\_\_\_

#### **Change Requests**

Service No and/or Bill Account No: \_\_\_\_\_

To change from paper bills to electronic bills ("eBills") \_\_\_\_\_ @ \_\_\_\_\_

To change from eBills to paper bills (please post to the new Billing Address as shown below, if applicable) (\$20/invoice)

Change Billing Address to: \_\_\_\_\_

Change existing eBills email address:

Existing email address: \_\_\_\_\_ @ \_\_\_\_\_ New email address: \_\_\_\_\_ @ \_\_\_\_\_

Accounts grouping

Bill Account Number(s)\*: \_\_\_\_\_ or Service Number(s): \_\_\_\_\_

Group to existing Bill Account Number: \_\_\_\_\_

*\* If the above space is not enough, please use separate sheets.*

### Section B: Terms and Conditions

1. This Form is designed to process a Customer's request for changing bill preference from paper bills to eBills, or for existing eBill Customers to change email address for receiving eBills in relation to services provided by Hong Kong Telecommunications (HKT) Limited ("HKT"). The Form is not for the purpose of transfer, assignment or novation of the identity of a Customer.
2. This Form must be completed by one or more duly authorized Customer officers. HKT shall assume that all signatories in this Form and the Contact Person given in this Form, or other documents, are duly authorized to act for and on behalf of the Customer.
3. Any change request in this Form is subject to verification and approval by HKT. The Customer agrees to promptly provide to HKT such information and documents as HKT may request from time to time, for the purpose of verification and/or processing of the change request in this Form.
4. Subject to approval of each change request in this Form by HKT, it is estimated that each change request will come into effect from the next billing cycle of each of the services.
5. Customer must provide HKT with accurate, complete and up-to-date information in this Form.
6. eBill is free of charge and will be sent to the Customer's designated email address.
7. If eBill is chosen, the Customer must ensure that only authorized persons shall be allowed to access and view eBills.
8. If paper bill is chosen, the Customer will receive paper bill by mail to its designated billing address, and a charge of HK\$20 per paper bill will be payable by the Customer.
9. Any change request in this Form will be deemed to replace existing information provided by the Customer.

### Section C: Personal Information Collection Statement *(applicable only to the Customer signing this Form in his/her personal capacity, or for and on behalf of a sole proprietorship or partnership)*

Depending on the services referenced in this Form, the personal data and other information ("Data") so provided is collected, used and retained by HKT in accordance with the requirements of the Personal Data (Privacy) Ordinance and the Privacy Policy Statement (which can be viewed at <http://www.hkt.com/legal/privacy.html>), which also governs, together with the applicable terms and conditions of the services and the change requests in this Form, how the Data is used and to whom it is disclosed. The Data will be verified against current data for identifying and updating current service accounts for the purpose of continuing the services and management of the accounts without altering permitted uses of the current data and the possibility of being used by and/or disclosed to affiliates, or related companies, of the PCCW Group and debt collection agents. Requests to access, or correct, the Data can be made in writing to the Privacy Compliance Officer at PO Box 9896, GPO, Hong Kong.

### Section D: Customer's agreement

I/we, being the Customer in this Form, have read and hereby agree to all this Form's terms and conditions, including the Personal Information Collection Statement (if applicable). I/we confirm that my/our signatory(ies) in this Form has/have been duly authorized by me/us.

For and on behalf of the Customer (with company chop)

\_\_\_\_\_  
Authorized signatory(ies)

Name(s): \_\_\_\_\_ Title(s): \_\_\_\_\_ Date: \_\_\_\_\_