

Mobile Termination Form

Ref./Account No.:



GO p.l.c., Fra Diegu Marsa, MRS 1501, Malta
T. 8007 2121 | F. +356 2594 5895
E. customercare@go.com.mt | W. www.go.com.mt
Company Registration No.: C22334
VAT Registered No.: MT 1282-6209

Date: _____

Customer Information

Company: _____ Account: _____
Name & Surname : _____
Address: _____
ID Card Number: _____ Vat Number: _____
Tel Number: _____ C-Reg Number: _____

Service Owner

Name & Surname : _____
Address: _____
ID Card Number: _____ Email: _____
Passport Number: _____ Date of Birth: _____
ICCID Number: _____ Mobile Number: _____
Current Tariff plan: _____

| | |
|---|--|
| Laptop Connect (if applicable): Laptop Connect Order Form No.: _____ Laptop/Netbook Make & Model: _____ | HSDPA Device Make & Model: _____ IMEI : _____ |
| C.A. Payback : No Yes → Paid € _____ Cheque Number: _____ Existing Contract Number: _____ | Receipt Number : _____ Other: _____ Receipt Num.: _____ Amount Paid: € _____ |

How would you rate GO mobiles quality of service?

| | | | | | |
|-----------------------------|-----------|------|---------|------|-----------|
| Customer Care on 146 | Very Good | Good | Average | Poor | Very Poor |
| Retail Outlets | Very Good | Good | Average | Poor | Very Poor |

Do you think that GO mobiles tariffs are competitive?

Yes No

Did you ever use your GO mobile line abroad?

Yes No

Do you think that GO mobile provides good roaming facilities?

Yes No

How would you rate GO mobiles billing on the following aspects?

| | | | | | |
|----------------------------------|-----------|------|---------|------|-----------|
| Clarity of bill | Very Good | Good | Average | Poor | Very Poor |
| Helpfulness of Billing personnel | Very Good | Good | Average | Poor | Very Poor |

How would you rate GO mobiles coverage?

Very Good Good Average Poor Very Poor

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Please state the reason for terminating your subscription?

GO Mobile Rep:

Signature: _____

Name in Blocks: _____

GO Outlet: _____

Billing : Finance :

Client (Signatory of Contract)

I agree with the above

Signature/s: _____

Name in Blocks: _____