

Application Form: Change Of Ownership



Outgoing/Current Owner Details

By completing and signing this form, you are transferring one or more services from your existing Swoop Broadband account to a new Swoop Broadband account holder.

You will no longer have access to the account or any of the associated features of the transferred services unless you are granted access by the new account holder.

Any outstanding balance must be cleared before transfer will be completed. You should make arrangements with the new account holder to settle any financial issues prior to submitting this form.

The New/Incoming Account Holder must complete and return the second page of this form. Transfer will not complete until we have received both completed sections.

You have three options for any @dcsi email addresses that may be attached to your account:

Close – email address will be terminated upon completion of transfer

Transfer – email address will be transferred with the service to the new account holder

Keep – if you have another eligible Swoop Broadband service, you may elect to keep your email addresses.

Please provide details of the service you are transferring the email address to. Note that you can have a maximum of 5 email addresses per service.

Account holder name:

Service/s to transfer (type/address)

Contact phone number:

Date to transfer:

@dcsi email addresses

1)	Close/Transfer/Keep
2)	Close/Transfer/Keep
3)	Close/Transfer/Keep
4)	Close/Transfer/Keep
5)	Close/Transfer/Keep

Declaration for the Current/Outgoing Account Holder:

I, the above named, declare that:

- I am the Account Holder of the above account.
- I agree to arrange payment of any outstanding fees or charges relating to the service/s named above prior to the transfer
- I am aware that I will lose all administrative control over the above-named service/s and any associated add-ons (e.g. data blocks or static IP addresses).
- I give Swoop Broadband permission to transfer the above service/s to the new account holder named on the following page.

Signature

Date

Application Form: Change Of Ownership



Incoming/New Owner Details

By completing and signing this form, you are transferring one or more services from an existing DCSI account into your own name. You are agreeing to take over responsibility for the account, including financial responsibility.

Any outstanding balance must be cleared before transfer will be completed. You should make arrangements with the previous account holder to settle any financial issues prior to submitting this form.

The Current/Outgoing Account Holder must complete and return the first page of this form. Transfer will not complete until we have received both completed sections.

Account holder name:

Contact phone number: Date of birth:

Contact email address:

Postal address:

Preferred payment method: see swoopbroadband.com.au/support/accounts

Service/s to transfer (type/address):

Date to Transfer:

Nominate Authorised Representatives

By default, your Authorised Representative/s can communicate with us regarding your service with the same level of access as you do. They can make alterations to your plan, subscription or details, request payment histories and undertake all other actions including requesting termination of the service. If you wish to specify limitations to your Authorised Representative's rights, please call us.

Name: Email:

Declaration for New/Incoming Account Holder

I, the above-named, declare that:

- I agree to accept the transfer of ownership of the specified Swoop Broadband service/s into my name and I assume responsibility for the service/s.
- I agree to be responsible for all fees and charges related to these services after the transfer has been completed.
- I am aware I can contact Swoop Broadband to change the subscribed plan of my service once transfer is complete, and if I do not do this then I accept that I will continue on the existing plan and pricing.
- I have read, and accept, the Terms of Service (<https://dcsi.net.au/legal/terms-of-service>) and Acceptable Use Policy, and all other applicable policies
- (VoIP/Fixed Line Phone Only) I have signed and returned the VoIP IC and CSG Waiver Form.

Signature Date