

CLIENT / USER REGISTRATION FORM

* FOR ADDITIONAL OR SUB USER ACCOUNTS, IGNORE THE VEHICLE INFORMATION AS WELL AS TRACKING SUBSCRIPTION SERVICES SECTIONS.

CLIENT / COMPANY INFORMATION

NAME/COMPANY

ID/COMP REG NUMBER

VAT NUMBER

PHYSICAL ADDRESS

POSTAL ADDRESS

CONTACT PERSON

NAME & SURNAME

CELLPHONE

EMAIL

ACCOUNTS CONTACT

NAME & SURNAME

CELLPHONE

EMAIL

SOLUTIONS *(Please tick the appropriate box/es)*

- | | | |
|---|---|--|
| <input type="checkbox"/> GPS TRACKING | <input type="checkbox"/> FLEET MANAGEMENT | <input type="checkbox"/> LIVE CAMERA STREAMING |
| <input type="checkbox"/> ROUTING & SCHEDULING | <input type="checkbox"/> EMERGENCY ASSISTANCE | <input type="checkbox"/> BUREAU SERVICES |

GPS TRACKING PRODUCTS *(Please tick and indicate Quantity in the appropriate box/es)*

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> ___ QTY BIKER | <input type="checkbox"/> ___ QTY MOBII | <input type="checkbox"/> ___ QTY DRIVER | <input type="checkbox"/> ___ QTY FLEET |
| <input type="checkbox"/> ___ QTY FLEET FUEL | <input type="checkbox"/> ___ QTY CANbus | <input type="checkbox"/> ___ QTY e-MOBII | <input type="checkbox"/> ___ QTY TRASCON |
| <input type="checkbox"/> ___ QTY PEDESTRIAN | <input type="checkbox"/> ___ QTY GUARD | <input type="checkbox"/> ___ QTY LONEWORKER | <input type="checkbox"/> ___ QTY CASI PANIC |
| <input type="checkbox"/> ___ QTY MINI ASSET | <input type="checkbox"/> ___ QTY MAXI ASSET | <input type="checkbox"/> ___ QTY _____ | <input type="checkbox"/> ___ QTY _____ |

VEHICLE INFORMATION

YEAR	MAKE	MODEL
COLOUR	VIN NUMBER	ENGIN NUMBER

SUBSCRIPTION SERVICES REQUIRED *(Please tick the appropriate box/es)*

- | | | |
|--|---|--|
| <input type="checkbox"/> SELFTRACK SIM CARD | <input type="checkbox"/> OTHER SUBSCRIPTIONS: | <input type="checkbox"/> By ticking this box and signing hereunder, I confirm that I have read and accepted Selftrack's Terms and Conditions which are accessible at www.selftrack.co.za . |
| <input type="checkbox"/> CROSS-BORDER SIM CARD | _____ | |
| <input type="checkbox"/> CLIENT SIM CARD | _____ | |
| <input type="checkbox"/> STOLEN VEHICLE RECOVERY | _____ | NAME _____ DATE _____ |