

Transfer of Ownership

Please complete the application form clearly in BLOCK CAPITALS, ensuring all sections are completed correctly.
Please complete this form and Direct Debit mandate, then scan and return the completed form by email to 7day.ie@vodafone.com.

The customer must show two original forms of identification. Please attach copies of the two documents to this application form.

Section 1 To be completed by the existing Vodafone Customer.

Customer's name or company name in full	Number to be transferred	For company transfers, use company name. For individual transfers, use first name, surname, title; Mr, Mrs etc, respectively.
<input type="text"/>	<input type="text"/>	
Account contact	Customer's address	
<input type="text"/>	<input type="text"/>	
Date of birth	Position/title in the company (if applicable)	For company transfers specify position/title of authorised signatory.
<input type="text" value="DD/MM/YY"/>	<input type="text"/>	

I am authorised to transfer service on the above mobile number to the name individual / company in Section 2 ("Account Holder") and the information I have provided is true and complete. I am responsible for all charges and complying with the terms of the contract for this service until the transfer is complete. Once the transfer is complete, I understand I will cease to be the contract holder for service on this number and I am transferring ownership of same to the Account Holder. The Account Holder will become the contract holder for service on this number and solely responsible for all obligations under that contract. The Account Holder will hold all rights and entitlements under the contract for this number. In particular, the Account Holder will have full access to the service usage details (including call and text logs), information and bills related to this number. If, in the future, I would like to become the contract holder for service on this number again, a Transfer of Ownership form will need to be completed and the Account Holder will need to provide consent to the transfer (which may be withheld). If this transfer cannot be completed and you would like to terminate your mobile service agreement, early termination fees may apply. If you agree to these terms, please sign below:

Signature

Section 2 To be completed by the customer taking ownership of the above number.

Customer's name or company name in full	Customer's Address/Company Address	If new Customer is an existing Vodafone Customer, please state existing Vodafone number.
<input type="text"/>	<input type="text"/>	
Account contact (if applicable)	Existing Vodafone number	Date of birth (for validation)
<input type="text"/>	<input type="text" value="08"/>	<input type="text" value="DD/MM/YY"/>
Principal User	Email ID	
<input type="text"/>	<input type="text"/>	
Home phone number	Work phone number	
<input type="text"/>	<input type="text"/>	

Section 3 Service and price plan.

Price plan	<div>If moving from a personal to an existing business company account, please speak to your account contact in your company.</div>
<input type="text"/>	
Add-on (Existing Add-ons will be carried over)	
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
Services	
1. Insurance Plan	2. Directory Enquiry
<input type="text"/>	<input type="text"/>



Please pay your current Vodafone bill in the usual way. When we receive the fully completed mandate, we will set up your account for the Direct Debit payment option you have selected on your next Vodafone bill.

Your bank account is debited fourteen days from the issue date of your Vodafone bill.

Customer details

Your name and address

Contact number

SEPA Direct Debit Mandate

Creditor name and address: Vodafone Ireland Limited, MountainView, Leopardstown, Dublin 18.
Creditor identifier: IE57ZZZ301646

Bank details

Customer name on Bank or Building Society Account: (Deposit accounts not acceptable)*

International Bank Account Number (IBAN)*

Bank Identifier Code (BIC)*

Date*

Signature 1*

Signature 2*

Upon set up your SEPA direct debit, a confirmation letter will be sent to you confirming your account number and your Unique Mandate Reference (UMR) UMR

SEPA Direct Debit Mandate

By signing this mandate form, you authorise Vodafone Ireland to send instructions to your bank to debit your account, and your bank to debit your account in accordance with the instruction from Vodafone Ireland. As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited. Your rights are explained in a statement that you can obtain from your bank.

*Required field



Terms and conditions

The information which I have supplied is true and complete. I confirm I have read the contract (and in particular Sections 2 and 3 above and any additional terms and conditions applicable) and agree to comply with it. A copy of the General Terms and Conditions of the Vodafone Mobile Telecommunications Service, price plan terms and any other applicable terms have been made available to me and are viewable on www.vodafone.ie/terms. In particular I acknowledge that:

- (i) If Vodafone accepts this transfer application, I will be fully responsible for the mobile service agreement on the above mobile number, including all responsibilities and obligations arising under same. Any unexpired portion of the minimum period of the transferred contract will continue to apply.
- (ii) I have been duly advised of the quality of coverage and the monthly charge payable in accordance with the price plan selected on this number and I will be liable for all charges associated with the transferring service agreement. They will be billed on a monthly basis after the transfer is complete. All charges are viewable on www.vodafone.ie/rates and further detail on charges are available on request.

- (iii) Acceptance of this application for service is subject to status and a satisfactory credit check which may involve third parties. I understand this application may require a security payment.
- (iv) From time to time, Vodafone and its agents may contact you in writing, by telephone, email or text message regarding specific offers or information on products or services or market research. By ticking the relevant box below, please indicate your preferences to Vodafone. You can amend your marketing preferences at any time on My Vodafone or by calling Vodafone on 1800 200 234. Note this can take up to 7 working days to take effect.

SMS YES ☐ NO ☐ Email YES ☐ NO ☐ Phone YES ☐ NO ☐

Post YES ☐ NO ☐ Surveys YES ☐ NO ☐

- (v) I understand I will have access to confidential information relating to all mobile services sitting on their account, such as numbers contacted and usage activity.

By signing below, I accept and agree to be bound by the Terms and Conditions above. I agree to perform the transferring contract (and be bound by its terms in every way) from the date at which Vodafone completes the transfer.

Customer acceptance

Print name

Sales agent name print*

Authorised customer signature*

We hereby acknowledge that we accept and agree to be bound by the Terms and Conditions below. We further acknowledge that a copy of the Terms and Conditions have been provided to us prior to signing this contract and that we agree to be bound by the terms and conditions. Acceptance of this application is subject to status and a satisfactory credit check which may involve third parties.

Title

Date

DD/MM/YY

