



Vodafone At Home change application form

Vodafone
Power to you

Vodafone At Home change application form



Instructions for customer:

- 1) To add additional name(s) to an existing account please complete section 1 and 2 below
- 2) To change account name please complete section 1 and 3a/b below
- 3) To transfer ownership please complete section 1 and 4a/b below. Along with a Customer Application Form (sent with this email or downloaded online separately)
- 4) To amend payment details please complete the direct debit mandate on section 5 below

All requests will be completed within 7 working days; if any information is incorrect we will be back in touch with you within this time

Section 1 – Existing account information

| Account information | |
|---------------------------------------|----------------------|
| Current Vodafone at Home account name | |
| <input type="text"/> | |
| Account number | Telephone number |
| <input type="text"/> | <input type="text"/> |
| Address | |
| <input type="text"/> | |
| <input type="text"/> | |

Section 2 – Adding additional name(s) to an existing account

| Additional account name(s) | |
|--|---|
| I <input type="text"/> | confirm my consent to add the name(s) to my Vodafone at Home account <input type="text"/> |
| Existing customers signature | Date |
| <input type="text"/> | <input type="text"/> |
| New customer signature 1 | Date |
| <input type="text"/> | <input type="text"/> |
| New customer signature 2 | Date |
| <input type="text"/> | <input type="text"/> |
| Please note the existing terms and conditions will now apply to additional names added to the account along with the existing customer name. Please see www.vodafone.ie/terms for full details | |

Section 3 – Change of account name (i.e. spouse or family member)

| Change of account name | | |
|---|--|---|
| Section 3a to be completed by the existing customer | | |
| Reason for the request | | |
| <input type="text"/> | | |
| I <input type="text"/> | wish to have my Vodafone at Home account at the above address transferred to | |
| <input type="text"/> | of the same address. | |
| Existing customer signature | Date | |
| <input type="text"/> | <input type="text"/> | |
| Section 3b to be completed by the person taking over the account | | |
| I <input type="text"/> | | wish to take over the account and accept all related charges and terms, both outstanding and in the |
| future relating to this line. | | |
| Mobile number | Email address | |
| <input type="text"/> | <input type="text"/> | |
| Date of birth | | |
| <input type="text"/> | | |
| New customers signature | Date | |
| <input type="text"/> | <input type="text"/> | |



Change of account name continued

Section 3b continued:

If existing customer is unable to complete section 3a due to absence please detail below the reason for the change of name request:

Please note existing terms and conditions of service will apply to the new family member or spouse taking over the account. Please see www.vodafone.ie/terms for full details

Section 4 – Transfer of ownership (i.e. new home owner or tenant)

Transfer of ownership

Section 4a to be completed by the existing customer

Reason for the request

I wish to have my Vodafone at Home account at the above address transferred to

of the same address.

Existing customer signature

Date

On receipt of this request Vodafone will cease your billing. All outstanding bills up to this date will be sent to you directly. If you wish to have your bills sent to an alternative address please enter the address below:

Section 4b to be completed by the person taking over the account

I wish to take over the account for the telephone number

and accept all related charges and terms for this service as I am the current resident of the provided address.

Mobile number

Email address

Date of birth

DD/MM/YY

New customer signature

Date

If section 4a could not be completed due to the absence of the previous customer please attach documentation such as a copy of tenancy/lease agreement, a landlords declaration of tenancy, an owners certificate or other documentation to indicate that you are resident at the service address.

