

Prepaid Pre-authorized Payment/Roaming Form

NorthernTel

A DIVISION OF BELL ALIANT

here. for you.™

1. Carefully read through the form and determine which sections apply to you.
2. Complete the applicable sections of the form.
3. Return the completed form within 30 days to:

Fax: 1-888-677-0770

Mail: Attn : Top Up Programs, NorthernTel Mobility, 555 Centrale Val d'Or, Québec J9P1P6

For Prepaid Roaming it is mandatory to have the Automatic Top-Up Program added.

Account Holder's Name: _____ Mobile Phone #: _____

Address: _____ City: _____ Province: _____ Postal Code: _____

Contact Telephone #: _____ E-mail Address (optional): _____

Payment Program: Automatic Top-Up Program Express Top-Up Program Allowance Program Automatic Allowance Program

Debit Payments:

Please complete **only** if you will be paying directly from your Bank Account.

*For joint accounts, all depositors must sign this form if more than one signature is required on cheques issued for the account. Names must appear on the cheque or deposit slip.

Bank Name: _____

Branch Bank Address: _____

Branch/Transit #: (5 digits) _____

Bank Number: (3 digits) _____

Account #: (up to 12 digits) _____

The diagram shows a cheque stub with the following fields: Your Name, Your Home Address, DATE, 208, PAY TO THE ORDER OF, \$, Your Bank's Name, Your Bank's Address, MEMO, and MICR line. The MICR line is labeled with Transit Number, Bank Number, and Account Number.

**Please include a void cheque or deposit slip along with this completed form.

Prepaid Roaming:

The roaming feature will automatically be added to your account with the registration of the Auto Top-up Program, and you will be responsible for any charges incurred while roaming. This will allow you to use your phone once you leave the NorthernTel Mobility network. **Roaming charges are only incurred when roaming outside of the NorthernTel Mobility network.**

Credit Payments:

Please complete only if you will be paying for the Automatic Top-Up via Credit Card.

Mastercard Visa American Express

Credit Card#: _____ Expiry Date: _____

Billing Address: _____ Please check if same as above :

Terms & Conditions:

I (we), as the account holder(s), authorize NorthernTel Mobility and my (our) financial institution, as indicated above, to debit my (our) account, at the branch specified above or charge my credit card, for the purpose of adding funds to my (our) NorthernTel Mobility Prepaid account, under the terms and conditions agreed to by me (us) with NorthernTel Mobility until such time as notice to the contrary is given by me (us) to NorthernTel Mobility. I (we) authorize NorthernTel Mobility: (i) to collect and use my (our) personal and/or account information for the above purposes; and (ii) to communicate such information to Bell Canada and Bell Mobility, as NorthernTel Mobility's service providers, as well as their subsequent use of the information for the same purposes. The amount may vary depending on (a) the balance of the account; (b) the amount of the Top-Up authorized by NorthernTel Mobility; and (c) usage and other billable services specifically billed to the account. An administrative charge is applicable against my account for returned or declined payments. Please allow forty-eight (48) hours for processing of the Top-Up charges. **The Automatic Top-Up feature must remain on the account for a minimum of ninety (90) days after the Prepaid Roaming feature has been removed in order to apply foreign roaming call records.** Funds must be used prior to deactivation or set expiry date, as unused funds are non-refundable. I (we) will notify NorthernTel Mobility of any changes in my (our) personal and/or account information or termination of this authorization at least five (5) days prior to the next date of the pre-authorized payment. I (we) expressly waive any pre-notification requirements that may apply to the processing of pre-authorized payments. I (we) warrant and guarantee that: (1) the account information provided above is complete and accurate, and (2) all persons whose signatures are required to authorize payments from the account specified above have authorized the payments to be drawn pursuant to this authorization. I (we) understand that delivery of this authorization to NorthernTel Mobility constitutes delivery of this authorization by me (us) to the above-noted institution. NorthernTel Mobility reserves the right to terminate my enrolment into the aforementioned program at any time. **If necessary, a guardian's signature must be provided. I (we) have read and understood the terms of this authorization and acknowledge receipt of a copy thereof. I agree that a facsimile of my signature may be used to evidence my acceptance of this agreement.**

Signature(s): 1. _____ 2. _____ Date: _____