

Service and Support Registration Form

Service Offer No.

Selection Service Package:

Contract Partner: (Address)

Endcustomer: (provide additional organization name, only for reseller)

Commercial Contact: (Name / Surname / E-Mail / Mobile Phone Number)

Billing Address: (Invoice address)

Billing Remarks: Optional

Registered Support User(s): Name / Surname / E-Mail / Mobile Phone Number

Support User Role:

Securosys 365 DKE Cockpit User(s): Name / Surname / E-Mail / Mobile Phone Number

Cockpit User Role:

Additional Remarks:

Start Date / End Date: (please note that, on this date the login credentials will be issued)

City, Date, Name

Signature: