



All fields required unless noted otherwise

### Dealer/Distributor Information:

Dealership/Distributorship Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact E-mail: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

### Subscribing Company Information:

(Note: If existing KVH account, please provide KVH account #) KVH Account #: \_\_\_\_\_

Subscribing Company Name: \_\_\_\_\_

Subscribing Company Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Postal/Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Tax ID #: \_\_\_\_\_

Primary Company Representative Name: \_\_\_\_\_

Primary Company Representative E-mail: \_\_\_\_\_

Primary Company Representative Title:  Owner  Fleet Manager  IT Manager  Captain  Other \_\_\_\_\_

Secondary Company Representative (if applicable): \_\_\_\_\_

Secondary Company Representative E-mail (if applicable): \_\_\_\_\_

Secondary Company Representative Title (if applicable):  Fleet Manager  IT Manager  Captain  Other \_\_\_\_\_

### Service Payment Information:

Invoiced\*  Credit Card (Internal Use Only: Credit Approved \_\_\_\_\_ KVH Initials \_\_\_\_\_)

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Card Type:  MC  VISA  AMEX  DSC

Billing Representative Name (same as:  Primary  Secondary): \_\_\_\_\_

Billing Representative E-mail (same as:  Primary  Secondary): \_\_\_\_\_

Billing Address (same as:  Primary  Secondary): \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Postal/Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

**Fax or e-mail this completed form, an Initialed Airtime Services End User Agreement  
& all required forms to the appropriate KVH Airtime Group:**

**Americas & Australia**  
+1 401 851-3823  
satelliteservices@kvh.com

**Europe, Mideast, Africa & Asia**  
+45 45 160 181  
airtime@kvh.dk

**Company Representative Name:**(PRINT) \_\_\_\_\_

**Company Representative Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Your signature indicates that you have read, understand, and accept the terms and conditions of the KVH Airtime Services End User Agreement.  
\$100.00 activation fee per vessel applies. (Please allow two business days to process.)



# TracPhone® V3 Service Activation Form

# Commercial Vessel Info

All fields required unless noted otherwise

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**Subscribing Company** \_\_\_\_\_ KVH Account #: \_\_\_\_\_  
*(if available)*

## Vessel Information

*(Vessel Information is required for every vessel in a fleet; use form: "TracPhone V3 – Existing Commercial Account: Add-a-Vessel" for additional vessels)*

Vessel Name: \_\_\_\_\_

Vessel Country of Registration: \_\_\_\_\_ Vessel Year/Length: \_\_\_\_\_

Vessel Gross Tonnage: \_\_\_\_\_ Vessel IMO Registration #: \_\_\_\_\_  
*(if applicable)*

Vessel Phone #: \_\_\_\_\_ Vessel Radio Call Sign: \_\_\_\_\_  
*(if available)*

Vessel Type:  Bulk Carrier     Fishing     Naval     Passenger  
 Charter     Government (other)     Non-ship Structures (rigs, etc.)     Tanker  
 Containership     Inland Waterways     Offshore     Other \_\_\_\_\_

Vessel Authorized Representative #1 Name \_\_\_\_\_

Vessel Authorized Representative #1 E-mail: \_\_\_\_\_

Vessel Authorized Representative #1 Title:  Captain     First Mate     Other \_\_\_\_\_

*For details on functions permitted by Authorized Representatives, or if you have additional Authorized Representatives to register, please see:  
"Airtime Account Authorized Representative Form" at [www.kvh.com/mvbservice](http://www.kvh.com/mvbservice)*

## Pick Vessel's Rate Plan:

### Metered Megabyte Rate Plans:

*(includes data and 1 phone line of Enhanced Voice Service)*

- Plan M50      \$49 per month<sup>1</sup>
- Plan M250    \$249 per month<sup>1</sup>
- Plan M500    \$499 per month<sup>1</sup>
- Plan M1000   \$999 per month<sup>1</sup>
- Plan \_\_\_\_\_ per month<sup>1</sup>

### Term of Contract:

Hardware: Owned  1-yr  2-yr  3-yr    Leased<sup>2</sup>:  3-yr  4-yr  \_\_\_\_\_

### GlobalCare Service Plan:

Subscribe     Declined    *if subscribing, submit "GlobalCare Program Agreement"*

### Options:

UCH-250 Fax Server Plan: \$45/month     Static IP: \$29/month per region<sup>3</sup>

<sup>1</sup> Plus any MBs over plan allotment & Enhanced Voice Service charges that may apply

<sup>2</sup> Leased equipment requires a lease contract; see Leasing Program for details

<sup>3</sup> For details; visit [www.kvh.com/staticip](http://www.kvh.com/staticip)

## Vessel's System Details:

ViaSat Modem Serial #: \_\_\_\_\_

Antenna Serial #: \_\_\_\_\_

Antenna Control Unit Serial #: \_\_\_\_\_

MTA/VoIP Router Serial #: \_\_\_\_\_

VoIP MAC Address: \_\_\_\_\_

UCH-250 Fax Server ID #: \_\_\_\_\_  
*(if applicable)*

Requested Country of Origin & Area Code of  
Enhanced Voice Service Phone: \_\_\_\_\_

**Requested  
Service Start Date:** \_\_\_\_\_

**Promotional Code:** \_\_\_\_\_  
*(if applicable)*

*For Internal Use Only:*