



DEBIT LETTER MOBI iB SERVICE

To Bank: _____

Bank Contact Name: _____

Branch & full Address: _____, Lebanon.

Dear Sirs,

As holder of Account Number _____, Account Name _____ with yourselves, I hereby request and empower you to settle the statements/bills, as presented once per month, owed by me to Broadband Plus SAL, upon the used of my MOBI iB Internet Subscription and charge my above mentioned account or my other account or future account I may hold with you, as long as funds are available.

I authorize Broadband Plus SAL to reserve payment for such statements/bills as presented.

Please implement accordingly.

These instructions are irrevocable.

Subscriber Full Name: _____

Subscriber Address: _____

Subscriber Signature: _____

Date: _____

Bank Signature: _____

Date: _____

Notifications:

1. The Bank shall not be held liable for non-availability of funds.
2. The Bank shall return due unpaid invoices to Broadband Plus SAL
3. Subscription cancellation request should be submitted to customercare@mobi.net.lb or faxed to 961 1 296002 1 week before end of each month.

Broadband Plus S.A.L

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customercare@mobi.net.lb & www.mobi.net.lb