

TERMINATION OF THE CONTRACT

Date of Application:

Client or Contract Name (Residential or Business) :

Contact Person Name :

Contact Number :

Address of Termination :

Client Comments :

Terms and Conditions:

*** Termination of the Contract contract requires 60 days written notice in advance to NCONNECT.**

Name of the Admin or staff attended:

Client Name :

Signature : _____

By checking the box, you agree that you have read and accept the TERMS AND CONDITIONS and this will be considered as your electronic signature.