

**Additional Services Request**

This is an Additional Services Request pursuant to the Data Services Contract ("the DSC") between an organisation who has acceded to the DSC (“the Customer”) and Xoserve Limited ("the CDSP"). The CDSP will process your Additional Services request and may send you an Additional Services Offer in due course.

Please note that this form must be submitted by your DSC Individual Contract Manager ("DSC ICM") to the email below.

Each Customer can appoint a Customer’s Agent to act on its behalf as agent in relation to this Additional Services Request and authorises the Customer’s Agent to otherwise act on the Customer’s behalf in respect of all matters relating to this Additional Services Request. Each Customer and its Customer Agent must be part of the same Group Company and each be a Party to the DSC. For the purpose of this request ‘Group Company’ shall mean in relation to a party, any entity that directly or indirectly controls, is controlled by, or is under common control with that party from time to time". "Control” has the meaning in section 1124 of the Corporation Tax Act 2010 and the words "Controls" or "Controlled" shall be construed accordingly.

**Please send the completed forms to:** [**commercial.enquiries@xoserve.com**](mailto:commercial.enquiries@xoserve.com)

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| **1. Customer Contact Information** | | | | | |
| Company Name and Number (1) Customer’s Agent | | [full company name and registered company number] | | | |
| Company Name and Number (2) | | [full company name and registered company number] | | | |
| Company Name and Number (3) | | [full company name and registered company number] | | | |
| Company Name and Number (4) | | [full company name and registered company number] | | | |
| Requester’s Name & Job Title | |  | Contact Number |  | |
| Email Address |  | |
| DSC Individual Contract Manager (ICM) | |  | Email Address |  | |
| Have the above mentioned companies signed the Data Services Contract? | | | | Please Confirm | |
| **2. Service Details** | | | | | |
| [Additional](#ChangeProposalInformation) Service Type | | | Please Confirm | | |
| Customer Shortcode(s) | | |  | | |
| Service Frequency | | | Please Confirm | | |
| Please give a brief description of your requirements | | |  | | |
| Business Benefits for receiving this service | | |  | | |
| **3. Authorisations** | | | | | |
| DSC Individual Contract Manager (ICM) Name | | |  | | |
| Nominated Representative Name and Email Address  *The DSC ICM may authorise the CDSP to discuss and progress the Additional Services Request with the Nominated Representative.* | | |  | | |
| Please confirm the Nominated Representative is authorised to accept any Additional Services Offer made by the CDSP in connection with this Additional Services Request. | | | Please Confirm | | |
| DSC Individual Contract Manager Signature |  | | Date of Submission | |  |