

CANCELLATION (CLOSE REQUEST)

Please completely fill in, sign and return this form by mail, e-mail or by fax to: **+43 6215 20889**

| | | | |
|---|-------------------|--|--|
| Surname, first name (name of the company) | | <input type="radio"/> Individual <input type="radio"/> Company | |
| Customer number | Postal / Zip code | City | |
| Phone number | Street, number | | |
| Fax number | Country | | |
| Email address | | | |

| | | |
|---|---|--|
| Cancel the following domain(s): | <p>As domain owner, I hereby waive all rights to the mentioned domain(s) and declare further not to make any demands on the refunding of possible residues.</p> <p>The cancellation of the domain can only be done by the domain owner. After termination the domain(s) is (are) free for new assignment.</p> | |
| <input type="text"/> | | |
| <input type="text"/> | | |
| <input type="text"/> | | |
| <input type="radio"/> Cancel only domain(s) | Time of cancellation for domain(s): | Please note with .at domains the Terms and Conditions of nic.at GmbH under http://www.nic.at . |
| <input type="radio"/> Cancel domain(s) with all additional benefits * | <input type="radio"/> At the end of the benefit periode* | |
| | <input type="radio"/> immediately ** | |

| |
|---|
| Cancel only these benefits (please indicate domain in brackets) |
| <input type="text"/> |
| <input type="text"/> |

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|---|
| Reason for the package change / special remarks (optional): |
| <input type="text"/> |
| <input type="text"/> |

| | |
|---|---|
| Signing person (in capital letters) | Signature of the owner / approved signatory, firm stamp |
| <input type="text"/> | <input type="text"/> |
| Date and place | |
| <input type="text"/> | |
| Outstanding accounts remain open also at cancellation. I have read the General Terms and Conditions, available under http://www.domaintchnik.com/agb , and expressly agree with them. | |

* ... With missing indication this option is selected automatically.

** ... Only possible with .at, .de, .ch, .li