

APPLICATION FORM FOR SHIFTING OF TELEPHONE

To

The General Manager (Central)

MAHANAGAR TELEPHONE NIGAM
LTD.

Khurshid Lal Bhawan, New Delhi-110050

The Divisional Eng.Phones (O/D)
.....Exchange
MTNL.....

Subject : Shifting of Telephone No.....

Sir,

Please arrange for the shifting of my/our Telephone No.....as per particulars given below :

1. NAME OF THE
SUBSCRIBER.....

(IN BLOCK CAPITAL LETTERS)

2. CORRESPONDENCE
ADDRESS.....

3. ADDRESS WHERE THE TELEPHONE
IS/WAS WORKING

4. State whether the telephone is working

at present or it has been disconnected

under shift/safe custody/due to non-payment

if so, give the full particulars & date

(A photo copy of latest bill paid-to be attached)

5. Accessories presently working on the Telephone

6. Are the accessories presently working

required at the New address also

7. (a) Address where the telephone is required to be shifted.

(b) Status of applicant in the organisation firm or company if the telephone is required to be shifted to address of firm or company care of address.

c. Number of the nearest working on the Telephone.

8. If the telephone shifting is not immediately feasible whether the telephone connection should continue to work at its present address or it should be closed under shift.

9. BILLING ADDRESS OF SUBSCRIBER DURING PERIOD OF DISCONNECTION UNDER SHIFT.

10. State if subscriber will carry the instrument with him to the new place of installation.

11. Reason for shifting :

(SIGNATURE OF THE SUBSCRIBER)

FOR OFFICE USE ONLY

(To be filled in by AOTR)

1. Whether the telephone is working or disconnected.

2. Date of disconnection if disconnected.

3. Out-standing bills of the subscriber,if any.

[ACCOUNTS OFFICER (TR)C-]

NOTE : 1. Signature of subscriber should be attested by Gazetted Officer/Manager of Nationalised bank.

2. Photocopy of last paid bill. Should Attached After Paying The bill