



Countrywide Cellular Service from **BSNL**

(Please fill by Block Capital Letters only)



BHARAT SANCHAR NIGAM LIMITED

(A Govt. of India Enterprise)

www.bsnl.co.in / www.calcuttatelephones.com

ORDER FORM FOR POST PAID CELLULAR CONNECTION

Sl. No.....

Affix self signed passport size photograph

CALCUTTA TELEPHONES

1. Status of Customer : Individual Business Corporate Govt-Central Govt-State Professional Others

2. Title/Name of the Customer / Company / Firm / Organization (SURNAME FIRST)

3. Name of Father/Husband/Group/Proprietor/Partner(s)

4. Complete Billing Address (supported with Documentary Evidence - Refer Clause 2.2 overleaf)

 Pin :

5. Complete Postal Address (if different from above)

 Pin :

6. PAN / GIR No. (In case PAN / GIR No. is not there submit IT declaration in Form 60 / 61)

7. Proof of Photo Identity (Refer Clause 2.3 overleaf) _____

8. Working Telephones Nos. a) BSNL _____ b) Others _____

9. E-Mail address: _____ @ _____

10. Details of Local Reference: Name.....Phone No. (if any).....
 (See Clause 2.4 overleaf) Address.....

11. Nationality 12. Date of Birth:

13. Sex: Male Female 14. Marital Status: Single Married

15. Educational Qualification Undergraduate Graduate Post Graduate Professional

16. Profession: Service Self employed Professional Student House wife

17. Monthly Household Income (Rs) < 5 000 5-10 000 10-15,000 > 15,000

18. Payment Mode: Cash Cheque Demand Draft Credit / Debit Card Amount

Cheque/DD Details No: Date:

Credit / Debit Card No: Valid upto :

Issuing Bank: _____ Branch: _____

19. Tariff Plan Opted: Standard Others (Refer Tariff Plan) 20. Credit Limit Opted: Rs.

21. Facility Required (tick whichever is required)
 STD Unlimited SMS National Roaming ISD Group Messaging International Roaming Itemised Billing Call Conference
 Friend & Family Talk Sunday Saver Night Saver WAP Others

In case the transaction is through a dealer:

Name of Dealer	Dealer Code & Stamp	I / We hereby confirm that this form was signed by subscriber in my/our presence and I/We physically seen and verified the document(s) / Address proof attached herewith with its original(s)
Signature		

I / We hereby declare that information given above is true to the best of my knowledge and I will abide by the prevailing Telegraph Act / Rules framed thereunder & Tariffs as amended from time to time. I / We are not a defaulter on account of non-payment of bills for any telecom services provided by any service provider. I / We have read and understood the terms and conditions provided overleaf to the form for Post paid cellular services and accept them as binding on me / us. I / We have understood all rates, charges and related terms and conditions at which telecommunication services are provided by BSNL as applicable on this date and as amended from time to time. I / We confirm that the information (s) / particulars supplied by me / us is correct in all respects.

Signature of Customer / Authorised Signatory	Signature of Customer / Authorised Signatory	Signed on
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FOR OFFICIAL USE ONLY

A. Instrument Make & Model : F. Date of Receipt of Form :

B. IMEI No. of the Cell Phone: G. Date of Activation :

C. IMSI No. of the Cell Phone:

D. Cellular No.:

E. Status of Customer :

Signature of Official

Designation: