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BHUTAN TELECOM LIMITED

APPLICATION FORM FOR NATIONAL PEERING

A. Customer Information

User ID# _____ Application Date: _____
Company/ISP Name: _____ AS NO# _____
First Name: _____ Last Name: _____
Address: _____ Billing Address: _____

City: _____ Telephone Number: _____

*Please attach a photocopy of trade license for private individual or private companies/for government organization
Please submit an Official letter)*

B. Type of National Peering (Please tick the appropriate one)

Speed (Bandwidth)	Monthly Tariff (NU)	Please Tick
256 Kbps	Nu. 5,000.00	
512 Kbps	Nu. 10,000.00	
1024 Kbps	Nu. 15,000.00	
2048 Kbps	Nu. 20,000.00	

Activation Date: _____

The service can be activated on any date of the month. Billing will commence from this date.

I declare that the above Internet services have been installed and are working on my premises. Additionally I have been instructed on how to use the above products and that the services have been installed to my satisfaction.

Signature: _____

For Official Use Only

Installation Date: Installed By: _____ Activation Date: Account Created by -----

Activation Date: _____ Account Created by _____

Money receipt # _____

Billing set up by _____ Date _____

Date:

Tel: +975-2-343434 Fax: +975-2-324312
Drophen Lam 2/28, Post Box 134, Thimphu, BHUTAN