



འབྲུག་བརྒྱུད་འཕྲིན་ཚོང་ཁུངས།

**BHUTAN TELECOM LTD.**  
**Registered Office in Thimphu**



**APPLICATION FORM FOR IP-VPN**

**A. Customer Information**

User ID : \_\_\_\_\_

Application Date : \_\_\_\_\_

Company Name : \_\_\_\_\_

ID : \_\_\_\_\_

First Name : \_\_\_\_\_

Last Name : \_\_\_\_\_

Address : \_\_\_\_\_

Billing Address : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

City : \_\_\_\_\_

Telephone No. : \_\_\_\_\_

**B. Location/Branch Office**

SL	Location/Branch Office	Bandwidth
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		

15		
16		
17		
18		
19		
20		
21		
22		
23		
24		
25		
26		
27		
28		
29		
30		
31		
32		
33		
34		
35		
36		
37		
38		
39		
40		
41		
42		
43		
44		
45		

46		
47		
48		
49		
50		

**Note:** VPN concentrator, Routers and Leased Line modems at site to be provided by Customer.

**Optional:** If you require internet connection, please specify the bandwidth \_\_\_\_\_

**Preferred Installation Date/Time:** \_\_\_\_\_

*Every effort is made to perform installations in a timely manner, however please note that installations will be made on a first come-first served basis*

**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:** \_\_\_\_\_

**C. 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: +975-2-322678, 322176, 321031 Fax: +975-2-324312**  
**Drophen Lam 2/28, Post Box 134, Thimphu, BHUTAN**