



འབྲུག་བརྒྱུད་འཕྲིན་ཚོང་ཁུངས།

# BHUTAN TELECOM LIMITED

## **SERVICE RE-CONNECTION FORM**

(To be filled by the applicant)

### **A. CUSTOMER'S INFORMATION** (Please fill this form in fully legible letters)

1. Name of the Customer:

First..... Middle..... Last.....

2. Address: .....

3. Service: a. Fixed Line  b. Mobile  c. Broadband  d. Leased Line

4. Service number to be reconnected: .....

5. Location: .....

6. Contact Number: .....

7. Facilities Required for fixed line:

Local Only: \_\_\_\_\_

STD \_\_\_\_\_

IDD \_\_\_\_\_

**Customer Signature**.....

### **B. OFFICIAL USE:**

**NOTE:** CAN feasibility has to be carried out if the number is disconnected more than three months.

1. Feasibility: DP Number/Tag : .....

2. Vertical MDF/Tag : .....

**Signature:** .....

Please attach a copy of citizenship identity card

Date: .....

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