



# MAHANAGAR TELEPHONE NIGAM LTD

Jeevan Bharati Bldg. - Tower 1, 12th floor, 124 Connaught Circus, New Delhi - 110001  
Web Site Address : http://www.mtnl.net.in

Stamp  
size  
Photograph  
(self signed)

<b>BASIC SERVICE</b>	<b>INTERNET</b>	<b>IPTV</b>	<b>GSM</b>	<b>Video Conf</b>	<b>GARUDA (CDMA)</b>		
LANDLINE	TRIBAND		DOLPHIN		MOBILE	POSTPAID	PREPAID
ISDN	DIALUP	VOIP	TRUMP		FWP	POSTPAID	PREPAID

\*1. Type of service required  
Please tick (✓)

\*2. Type of applicant : \_\_\_\_\_

\*3. Name      TITLE                      SURNAME                      FIRST                      MIDDLE

Mr Mrs Ms Dr      [Grid]

\*4. Father's/Husband's Name      [Grid]

\*5. Date of Birth (DD/MM/YY)      [Grid]      \*6. Sex M/F      [ ]      \*7. Nationality      [Grid]

(Date of incorporation in case of company)

\*8. Hobbies \_\_\_\_\_ \*9. Education \_\_\_\_\_ 10. Marital Status      Single      Married

11. Average income per month (Rs)      a) < 10,000      [ ]      b) 10,000 - 20,000      [ ]      c) 20,000 - 30,000      [ ]  
d) 30,000 - 50,000      [ ]      e) > 50,000      [ ]

\*12. Residential Address/  
Installation Address      [Grid]

13. E-mail id: \_\_\_\_\_ PIN CODE      [Grid]

14. Billing Address  
(If different from above)      [Grid]  
Local Address (For  
outstation customers)      [Grid]      PIN CODE      [Grid]

\*15.A) PAN NO./ GIR NO.      [Grid]      (If PAN No. not available please fill form 60)

16. Existing MTNL Tel No. (if any)      [Grid]      Existing Customer A/C No.      [Grid]

17. i) Type of any other service of MTNL or other Operator used by you \_\_\_\_\_

ii) Tel No of that service      a) [Grid]      b) [Grid]

\*18. Tariff Plan opted:      Service (1) \_\_\_\_\_ Tariff Code      [Grid]      Service (2) \_\_\_\_\_ Tariff Code      [Grid]  
Service (3) \_\_\_\_\_ Tariff Code      [Grid]      Service (4) \_\_\_\_\_ Tariff Code      [Grid]

\*19. Option for Receiving Bill \_\_\_\_\_

\*20. Option for Bill Payment \_\_\_\_\_

\*21. Type & Model No of handset/Telephone instrument/Modem required \_\_\_\_\_

\*22. Any additional Value added services required \_\_\_\_\_

23. NDNC Option:      Yes      No

\*24. Type of Identity proof submitted & its No.:      [Grid]

\*25. Mode of payment for Registration: (EMI / Down Payment) Cash / Cheque / DD Rs. \_\_\_\_\_

Credit/Debit/Cheque/DD No. \_\_\_\_\_ Date: \_\_\_\_\_

Bank account no. \_\_\_\_\_ Name of Bank & Branch on which Cheque / DD drawn \_\_\_\_\_

(in case of cheque)

\* Columns are mandatory.

### For office use

Booked By Name of CSC / Distributor / MBA: \_\_\_\_\_ CSC / Distributor Code      [Grid]

Customer A/c Number      [Grid]      CDMA Handset Model      [Grid]

Landline / Mobile No. / CDMA      [Grid]      SIM No. / ESN No.      [Grid]

-----Tear here-----

### ACKNOWLEDGEMENT SLIP

Received an application form for \_\_\_\_\_ service from \_\_\_\_\_ with the payment  
of Rs. \_\_\_\_\_ in Cash / through Cheque / DD / Credit / Debit cards

Signature & Name of MTNL officer with stamp \_\_\_\_\_ Date: \_\_\_\_\_



## CUSTOMER DECLARATION / UNDERTAKING :

I hereby declare and undertake that the above information is wholly true. I have read and understood the instructions and the terms & conditions of MTNL for this service and agree to abide by them. I have gone through the details of the tariff plan, which I have opted for, which I know, can change from time to time. I also agree that my connection is subject to verification, evaluation and acceptance by MTNL.

\* Signature of Subscriber \_\_\_\_\_  
(Signature, name & seal of Authorized Signatory in case of Company)

\* Received SIM/Handset  
\* Customer's Signature \_\_\_\_\_  
\*Date: \_\_\_\_\_

### Customer Guide

- At SI. No 2 fill up type of applicant i.e. Individual -- General (Gallantry / President's Police Medal for Gallantry awardees, War widows, Disabled soldiers, Blind, Serving DOT employees, Retired DOT or MTNL or BSNL employees, Senior Citizen), Non Residential telephone in Schools / Universities / Institutions / Homes for Aged / Orphans etc recognized by Government, a Private or Public Company, Sole Proprietor or Partnership firm.
- At SI. No 12 fill up the Address where fixed connection is to be installed and / or where customer normally resides in case of mobile connection. Customer has to submit proof of address for it.
- At SI. No 14 fill up the address where you want to receive the bill of the service. It is to be filled only if installation address is different from billing address.
- At SI. No 16 mention existing telephone / Mobile number & Customer Account No. of MTNL, on which you want to get extra service like Broadband, Internet or other Value added service etc.
- At SI. No 18 please fill up Tariff plan or Tariff code as given in our booklet for the service you want to avail. We have many alternative tariff plans to suit individual requirement.
- At SI. No 19 Option for Receiving Bill: If customer wants to receive the bill through e-mail write bill through e-mail else leave it blank. Kindly give your email address at serial No 13.
- At SI. No 20: Option for bill payment: If customer wants to pay the bill electronically please specify the mode of bill payment i.e. through ECS/Credit/Debit card. The total discount on both e-billing and e-payment combined together will not exceed more than Rs. 250.
- At SI. No 21 Please fill up type / model of handset / telephone instrument / modem / setup box required by you. Details of available handset are given in MTNL brochure.
- At SI. No 22 Please fill up details of any additional or value added service you want to avail like ISD / STD / extra email ids / extra e-mail space / internet / STD roaming / ISD roaming / CLIR / VMS / GPRS / MMS / Video Conferencing / Games on Demand / Video on Demand / Fixed IP addresses / Call forwarding / Abbreviated dialing / CLIP / any other. The details of value added addresses are given in MTNL brochure.
- At SI. No 23 indicate your option for National Do Not Call registry (NDNC).
- At SI. No 25 for payment option you want to choose i.e. Down payment / EMI / Credit card / Online payment

### Instructions

- (a) Please furnish the original documents with photocopies for verification of identity and address by one or more of the following documents as applicable: (i) Income Tax PAN card (ii) Passport (iii) Voter I.D. card (iv) Driving License (v) Armed License (vi) any photo identity cards issued by a Statutory / Government Authority.
- (b) Public Limited Cos. may enclose certificate of Incorporation, Memorandum of Articles, duly signed by M.D. / Director of the company along with any proof of identity as above of the authorized officer of the company. In case application is signed by an authorized signatory, then attested photocopy of Power of Attorney must be attached.
- (c) In case of Govt. of India Undertaking, Govt. of India Offices / State Govt. Offices, the aforesaid requirements are dispensed with self-certification on the letter head will suffice along with the name and designation of the coordinating officer to be consulted in case of need.
- (d) In case of Foreign Missions in India and other foreign agencies, the name and designation of the authorized officer along with details of officials etc. for whom the connection is intended.
- (e) In case of outstation subscribers, details of local reference(s) / Address be given at Column (14) Billing Address / Local Address to be given.
- (f) Payment will be accepted by cash / DD / pay order in favor of "MTNL Mumbai, Dolphin" for GSM services and "MTNL Mumbai" for any other service.
- (g) For availing telephone under concessional category, requisite documentary proof has to be submitted along with application. Contact our customer care executive or Toll Free Helpline or website for more detail.

For more details or any help visit our website <http://mumbai.mtnl.net.in> or Dial our Helpline



RASHTRA BOOK DEPOT, 13, 2ND FLOOR, RAJAWADI COLLEGE, RAJAWADI, MUMBAI - 400 004. Phone: 23422000, 23422001, 23422002, 23422003, 23422004, 23422005, 23422006, 23422007, 23422008, 23422009, 23422010, 23422011, 23422012, 23422013, 23422014, 23422015, 23422016, 23422017, 23422018, 23422019, 23422020, 23422021, 23422022, 23422023, 23422024, 23422025, 23422026, 23422027, 23422028, 23422029, 23422030, 23422031, 23422032, 23422033, 23422034, 23422035, 23422036, 23422037, 23422038, 23422039, 23422040, 23422041, 23422042, 23422043, 23422044, 23422045, 23422046, 23422047, 23422048, 23422049, 23422050, 23422051, 23422052, 23422053, 23422054, 23422055, 23422056, 23422057, 23422058, 23422059, 23422060, 23422061, 23422062, 23422063, 23422064, 23422065, 23422066, 23422067, 23422068, 23422069, 23422070, 23422071, 23422072, 23422073, 23422074, 23422075, 23422076, 23422077, 23422078, 23422079, 23422080, 23422081, 23422082, 23422083, 23422084, 23422085, 23422086, 23422087, 23422088, 23422089, 23422090, 23422091, 23422092, 23422093, 23422094, 23422095, 23422096, 23422097, 23422098, 23422099, 23422100.

**FORM NO. 60**  
(See third proviso to rule 114B)

Form of Declaration to be filed by a person who does not have either a Permanent Account Number or General Index Register number and who makes payment in cash in respect of transaction specified in clauses (a) to (h) of rule 114B.

1. Full Name and address of the declarant  
.....  
.....  
.....
2. Particulars of transaction
3. Amount of the transaction
4. Are you assessed to tax ? Yes / No
5. If yes,
  - (i) Details of Ward / Circle / Range where the last return of income was filed?
  - (ii) Reasons for not having Permanent Account Number / General Index Register Number?
6. Details of the document being produced in support of address in column (1)  
.....

**Verification**

I, ..... do hereby declare that what is stated above is true to the best of my knowledge and belief.  
Verified today, the ..... day of ..... (Month), 2001.

Date : .....

Place : .....

.....  
Signature of the declarant

- Instructions :-** Documents which can be produced in support of the address are :-
- (a) Ration Card
  - (b) Passport
  - (c) Driving Licence
  - (d) Identity Card issued by any institution
  - (e) Copy of the electricity bill or telephone bill showing residential address
  - (f) Any document or communication issued by any authority of Central Government, State Government or local bodies showing residential address
  - (g) Any other documentary evidence in support of the address given in the declaration

MIN. M



हस्ताक्षर नमुना (ग्राहक सेवा केंद्र के लिए) / SPECIMEN SIGNATURE (FOR CUSTOMER SERVICES CENTRE)

क) कंपनी का नाम / a) Name of the Company : -----

ख) ग्राहक क्र. / b) Consumer No. : -----

ग) पंजीकरण की तारीख / c) Date of Registration : -----

घ) टेलीफोन नं./ d) Telephone No. : -----

ज) कार्यादेश सं. व तारीख / Work Order No. & Date : -----

(ख,ग,घ,इ केवल कार्यालय के उपयोग के लिए) / b,c,d,& e for office use only)

च) आवेदक के हस्ताक्षर / Signature of Applicant : -----

आवेदन करते समय / to be signed at the time of : -----

application With Rubber Stamp : -----

-----कट किजीए-----

हस्ताक्षर नमुना (पंजीकरण के समय ग्राहक को दिया जाए)

SPECIMEN SIGNATURES (to be given to customer at the time of registration)

टेलीफोन संस्थापित करने पर इसे एमटीएनएल कर्मचारी को वापस दे दिया जाए ।

To be given back to MTNL Staff at the time of Installation of phone

क) कंपनी का नाम / a) Name of the Company : -----

ख) ग्राहक क्र. / b) Consumer No. : -----

ग) पंजीकरण की तारीख / c) Date of Registration : -----

घ) टेलीफोन नं. / d) Telephone No. : -----

ज) कार्यादेश सं. व तारीख / e) Work Order No. & Date : -----

(ख,ग,घ,इ केवल कार्यालय के उपयोग के लिए) / b,c,d, & e for office use only)

च) आवेदक के हस्ताक्षर / Signature of Applicant : -----

आवेदन करते समय / to be signed at the time of : -----

application With Rubber Stamp : -----

मैं, श्री / श्रीमती / कुमारी -----

ने पते -----

पर टेलीफोन कनेक्शन के लिए आवेदन किया है ।

मैं, निष्ठापूर्वक प्रतिज्ञान करता / करती हूँ कि यह टेलीफोन मेरे वास्तविक उपयोग के लिए है ।

I, Shri/Smt./Ku. ----- have applied for a

Telephone connection to have installed at address -----

I affirm that the telephone is for my bonafide use.

( संस्थापन के समय ग्राहक के हस्ताक्षर )

हस्ताक्षर नमूना (ग्राहक सेवा केंद्र के लिए) / SPECIMEN SIGNATURE (FOR CUSTOMER SERVICES CENTRE)

क) कंपनी का नाम / a) Name of the Company : -----

ख) ग्राहक क्र. / b) Consumer No. : -----

ग) पंजीकरण की तारीख / c) Date of Registration : -----

घ) टेलीफोन नं./ d) Telephone No. : -----

ज) कार्यादेश सं. व तारीख / Work Order No. & Date : -----

(ख,ग,घ,इ केवल कार्यालय के उपयोग के लिए) / b,c,d,& e for office use only)

च) आवेदक के हस्ताक्षर / Signature of Applicant : -----

आवेदन करते समय / to be signed at the time of : -----

application With Rubber Stamp : -----

-----कट किजीए-----

हस्ताक्षर नमूना (पंजीकरण के समय ग्राहक को दिया जाए)

SPECIMEN SIGNATURES (to be given to customer at the time of registration

टेलीफोन संस्थापित करने पर इसे एमटीएनएल कर्मचारी को वापस दे दिया जाए ।

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क) कंपनी का नाम / a) Name of the Company : -----

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घ) टेलीफोन नं. / d) Telephone No. : -----

ज) कार्यादेश सं. व तारीख / e) Work Order No. & Date : -----

(ख,ग,घ,इ केवल कार्यालय के उपयोग के लिए) / b,c,d, & e for office use only)

च) आवेदक के हस्ताक्षर / Signature of Applicant : -----

आवेदन करते समय / to be signed at the time of : -----

application With Rubber Stamp : -----

मैं, श्री / श्रीमती / कु. ----- (फर्म/कंपनी आदि का नाम)

----- का कर्मचारी/ भागीदार/निदेशक एतद्द्वारा प्रमाणित

करता हूँ कि टेलीफोन के पंजीकरण तथा उसे (पता) -----

पर संस्थापित कराने के लिए मुझे फर्म / कंपनी की ओर से विधिवत प्राधिकृत किया गया है ।

मैं निष्ठा पूर्वक प्रतिज्ञान करता हूँ कि यह टेलीफोन कंपनी के उपयोग के लिए है ।

I, Shri/Smt./Ku. ----- an Employee/Partner/

Director of the (Name of firm/Company etc.) -----

----- am duty

authorised by the firm/company to have the telephone registered & installed at address

----- on

behalf of the Company / Firm etc.

I affirm that the telephone is for bonafied use of the Company/firm

हस्ताक्षर / Signature -----