



# BHARAT SANCHAR NIGAM LIMITED

(website address)

## FORM FOR TEMPORARY TELEPHONE CONNECTION

Affix self signed passport size photograph (required for ISD facility only)

Companies/ Organizations

Individuals

(tick appropriate box)

(Please read the instructions before filling the form)

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

B. Name of the Joint Applicant, if any

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

3. PAN/GIR No:

(Please see Instruction # 2)

4. Telephone No. working, if any:

5. Complete Postal Address

House No

Street/ Road/ Village

Bldg./Appt.

Area/ Locality/ Tehsil

City/ District

Pin

6. Billing/ Correspondence Address (if different from 5 above)

7. Period for which connection required: from \_\_\_\_\_ to \_\_\_\_\_

8. Purpose: \_\_\_\_\_

9 Status of the Applicant:

Individual

Firm/ Company

Government/ PSU

10. Grounds on which temporary Telephone is required :

(for Medical Grounds, Medical Certificate issued by Registered Medical Practitioner to be attached)

11. Facilities Required (tick whichever is required) (please affix photograph for ISD facility) :

STD

ISD

CLI

Hotline

Conferencing

Call Forwarding

Abbreviated Dialling

12. Whether Telephone instrument is required:

Y/N

13. Whether Internal Wiring is required:

Y/N

14. Payment Mode:

Cash

Demand Draft

Amount

Payment Details:

DD No.

Dated

Drawn On:

Bank

Branch

I 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 am not a defaulter on account of non-payment of bills for any telecom services provided by any service provider. In the event of any dispute concerning any telecom line, apparatus or appliance, bill etc., between me/us and BSNL, the matter will be referred to the sole Arbitrator, appointed by a nominated authority in BSNL and shall be governed by the provisions of the Arbitration and Conciliation Act, 1996.

Signature of Customer/ Authorized Signatory

Signature of Customer/ Authorized Signatory

Signed on: Date

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1. The form may be filled up in Capital letters only.
2. In the absence of PAN/GIR number, declaration in form 60/61 may be furnished in the enclosed proforma.
3. The temporary telephone connection can be sanctioned for a maximum period of six months only.
4. The subscribers of the temporary telephone connections are liable to pay double the normal rental charges in advance alongwith the application form.
5. They are also required to pay additional security deposit for STD/ ISD facility on temporary telephone connection.



# BHARAT SANCHAR NIGAM LIMITED

(website address)

## FORM FOR TEMPORARY TELEPHONE CONNECTION

Affix self signed  
passport size  
photograph  
(required for  
ISD facility only)

Companies/ Organizations

Individuals

(tick appropriate box)

(Please read the instructions before filling the form)

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

B. Name of the Joint Applicant, if any

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

3. PAN/GIR No:

(Please see Instruction #2)

4. No. of telephone connections required:

In words

In figures

(Please see Instruction #3(a))

5. Telephone No. working, if any:

6. Complete Address where telephone(s) is/ are required:

House No

Street/ Road/ Village

Bldg./Appt.

Area/ Locality/ Tehsil

City/ District

Pin

7. Billing/ Correspondence Address (if different from 5 above)

8. Period for which connection required: from \_\_\_\_\_ to \_\_\_\_\_

9. Purpose: \_\_\_\_\_

10. Status of the Applicant:

Individual

Firm/ Company

Government/ PSU

11. Grounds on which temporary Telephone is required :

(for Medical Grounds, Medical Certificate issued by  
Registered Medical Practitioner to be attached)

12. Facilities Required (tick whichever is required) (please affix photograph for ISD facility) :

STD

ISD

CLI

Hotline

Conferencing

Call Forwarding

Hunting facility

Abbreviated dialing

13. Whether Telephone instrument is required:

Y/N

[please see instruction No.3(b)]

14. Whether Internal Wiring is required:

Y/N

[please instruction No.3(b)]

15. Mention the tariff package required:

[Please see various tariff packages available]

16. Payment Mode:

Cash

Demand Draft

Amount

Payment Details:

DD No.

Dated

Drawn On:

Bank

Branch

I 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 am not a defaulter on account of non-payment of bills for any telecom services provided by any service provider. In the event of any dispute concerning any telecom line, apparatus or appliance, bill etc., between me/us and BSNL, the matter will be referred to the sole Arbitrator, appointed by a nominated authority in BSNL and shall be governed by the provisions of the Arbitration and Conciliation Act, 1996.

Signature of Customer/ Authorized Signatory

Signature of Customer/ Authorized Signatory

Signed on: Date

## **INSTRUCTIONS FOR FILLING THE FORM FOR TEMPORARY TELEPHONE CONNECTION**

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1. The form may be filled up in Capital letters only.
2. The absence of PAN/GIR number, declaration in form 60/61 may be furnished in the enclosed proforma.
- 3 (a) If customer requires more than one telephone in the same name, Category and for installation at the same place, he / she may indicate here number of telephones required.
- 3 (b) A rebate is admissible on installation charges, if the telephone instrument and/ or internal wiring is arranged by the subscriber.
4. The temporary telephone connection can be sanctioned for a maximum period of six months only.
5. The subscribers of the temporary telephone connections are liable to pay double the normal rental charges in advance alongwith the application form.
6. They are also required to pay additional security deposit for STD/ ISD facility on temporary telephone connection.

**NOTE: RATES / TARIFF IS SUBJECT TO CHAGNE WITHOUT NOTICE.**