

BHARAT SANCHAR NIGAM LIMITED

(http://www.bsnl.co.in) FORM FOR ADD ON FACILITY [OPENING / CLOSING]

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

1. Telephone Number							
2. Namo	e of the C	ustomer (i	n Capital Let	ters) SURNAME F	IRST		
3. Addr	ess where	the teleph	one is workir	ng			
House No			Street/	Street/ Road/ Village			
Bldg./A	.ppt.						
Area/ L	ocality/ T	ehsil					
City/ District				Pin			
4.A Fac STD	ilities to l	be opened: CLI	Hotline	Conferencing	Abbreviated Dialing	Any Other	
4.B Fac STD	ilities to l ISD	closed:	Hotline	Conferencing	Abbreviated Dialing	Any Other	
I agree	to pay the	prescribed	d charges, as	amended from time	to time.		

Signature of Customer/ Authorised Signatory

Signed on: Date