

Telecom Connectivity / Data & Voice Service
APPLICATION FORM

1	Name & Address of the licensee	
2	Name & Address of the unit	
3	Registration/License number(attach copy)	
4	Contact numbers	
5	E mail ID	
6	PAN number (attach copy) and status of Income Tax Returns filed in the preceding two financial years	
7	GST Number (attach copy)	
8	Previous experience doing similar work if any. (enclose proof)	

I hereby declare that the above details and true and correct.

Name:

Signature:

Date: