APPLICATION FOR ISDN REGISTRATION

Price Rs. 10/- For ISDN Registration

Fee Rs. 3000/-

MAHANAGAR TELEPHONE NIGAM LIMITED MUMBAI

(Under Rule 414 of the Indian Telegraph Rules 1951) Date of Issue
(Valid for twelve Calender months from the date of Issue)
Sl. No. 735765 Valid upto
To,
The Chief General Manager (Commercial Section).
Mahanagar Telephone Nigam Limited
Mumbai Telephones, Mumbai
For Office Use Only
Application No. C 0965500
Date of issue
C.A. No
Telephone Exchange
Note Please read instructions before filling application from
Name of applicant
Title (Dr., Er., Adv. etc.)
Surname First name Second Name
Please leave one column blank between Surname, First Name and Second Name
Category (Tick in the appropriate box)
1 NOYT-G 3 NOYT-SS 5 OYT-G 7 Tatkal

2. N.OYT-S 4. N.OYT-SWS 6. OYT-S 8.				
4. Dialling facility required				
1. Local Only 2. Local & NSD 3. Local & NSD & ISD				
5. 1. Residential 2. Business 3. Government				
6. Status of applicant				
See Instructions				
7. Concessional Group				
See Instructions & Attach supporting documents				
8. Whether applicant shall provide wiring within his/her premises? Yes/No				
9. Whether applicant shall use his/her own Telephone instrument? Yes/No				
10. Payment particulars Amount Rs Mode of payment (Pay Order/DD/cheque)				
Pay Order/DD/Cheque No. Dated Date Month Year				
Bank & Branch				
11. Telephone Installation address				
House/Flat No. Floor No. Building/Apartment Plot No.				
Street/Road/Lane Locality/Village/District				
City PIN				
12. Address for correspondence				
House/Flat No. Floor No. Building/Apartment Plot No.				
Street/Road/Lane Locality/Village/District				
City PIN				
13. Existing telephone numbers (if any) Fax Number (if any)				

Nearest Telephone No.
14. Is there any telephone working in the name of the applicant anywhere /If Yes
Telephone Number
Address
15. Billing Address
House/Flat No. Floor No. Building/Apartment Plot No.
Street/Road/Lane Locality/Village/District
City PIN
16. If the application is for an EPABX Junction, indicate if MAIN or SUBSEQUENT
If SUBSEQUENT, indicate MAIN telephone number
17. If the applicant is a Partnership Firm or Hindu Undivided Family (HUF),
please furnish the following
Name of the karta of HUF
Name in full of members of HUG/Partnership Father's Name Relation to Karta
Firm
18. Nominee
Name
Address
Relation to applicant

19. I/We hereby declare that in respect of the service provided against the application, I/We will abide by the Indian Telegraph Rules as amended from time to time.
Date
Place
Signature of the applicant(s)
DUPLICATE APPLICATION FORM
(TO BE COMPLETED AND RETURNED ALONGWITH PRESCRIBED APPLICATION)
MAHANAGAR TELEPHONE NIGAM LIMITED, MUMBAI
Application for Telephone Valid for one year from the date of issue
Connection
(Under Rule 414 of Indian Telegraph Rules 1951)
For Office Use Only
Application No. C 0965500
Date of issue
C.A. No
Telephone Exchange
Note Please read instructions before filling application from
Name of applicant
Title (Dr., Er., Adv. etc.)
Surname First name Second Name
Please leave one column blank between Surname, First Name and Second Name
Category (Tick in the appropriate box)
1. N.OYT-G 3. N.OYT-SS 5. OYT-G 7. Tatkal

2. N.OYT-S 4. N.OYT-SWS 6. OYT-S 8.
4. Dialling facility required
1. Local Only 2. Local & NSD 3. Local & NSD & ISD
5. 1. Residential 2. Business 3. Government
6. Status of applicant 7. Concessional Group
See Instructions See Instructions & Attach supporting documents
8. Whether applicant shall provide wiring within his/her premises? Yes/No
9. Whether applicant shall use his/her own Telephone instrument? Yes/No
10. Payment particulars Amount Rs Mode of payment (Pay Order/DD/cheque)
Pay Order/DD/Cheque No. Dated Date Month Year
Bank & Branch
11. Telephone Installation address
House/Flat No. Floor No. Building/Apartment Plot No.
Street/Road/Lane Locality/Village/District
City PIN
12. Address for correspondence
House/Flat No. Floor No. Building/Apartment Plot No.
Street/Road/Lane Locality/Village/District
City PIN
13. Existing telephone numbers (if any) Fax Number (if any)
Nearest Telephone No.
14. Is there any telephone working in the name of the applicant anywhere /If Yes
Telephone Number

Address
15. Billing Address
House/Flat No. Floor No. Building/Apartment Plot No.
Street/Road/Lane Locality/Village/District
City PIN
16. If the application is for an EPABX Junction, indicate if MAIN or SUBSEQUENT
If SUBSEQUENT, indicate MAIN telephone number
17. If the applicant is a Partnership Firm or Hindu Undivided Family (HUF),
please furnish the following
Name of the karta of HUF
Name in full of members of HUG/Partnership Father's Name Relation to Karta
Firm
18. Nominee
Name
Address
Relation to applicant
19. I/We hereby declare that in respect of the service provided against the application, I/We will abide by the Indian Telegraph Rules as amended from time to time.
Date
Place

Signature of the applicant(s)

MAHANAGAR TELEPHONE NIGAM LIMITED MUMBAI

C 0965500 Specimen Signature of each person

PECIMEN	SIGNATURES	SHEET
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Application Form No	SPECIMEN SIGNATURES-I
Regn. NoDated	
Name of the Applicant (In Block C	apital Letters)
Application Form No	SPECIMEN SIGNATURES-II
Regn. NoDated	
Name of the Applicant (In Block C	apital Letters)
Application Form No	SPECIMEN SIGNATURES-III
Regn. NoDated	
Name of the Applicant (In Block C	apital Letters)

INSTRUCTIONS TO BE FOLLOWED FOR FILLING APPLICATION FORM

- 1. Please fill the boxes in block letters only.
- 2. The price paid for the application form is not subject to refund or adjustment and form is valid for a period of one year from the date of issue.
- 3. The application will be registered on payment of individual registration fee. Common bank draft for more than one application will not be accepted.
- 4. Individual must sign if the application is in individual individual's name.
- 5. In case of proprietory concern, proprietor must sign himself and affix rubber stamp.

- 6. In case of partnership concern, all partners or any one of the partners duly authorised or manager with the power of attorney may sign. In case of company, signatures should be of a person on behalf of the company, in accordance with the provisions of its Articles of Association.
- 7. In case of Govt. department, authorised person may sign and affix rubber stamp.
- 8. Copy of Documents duly attested may be attached as applicable:-
- (a) Power of attorney in case of authorisation
- (b) Registered partnership deed or partnership deed with from A issued by Registrar of Firms.
- (c) In case of SSI Unit, permanent SSI certificate and personal liability certificate from the proprietor of the Unit.
- (d) In case of Limited Co., a copy of the Articles of Association.
- (e) In case of special category/concessional group, the relevent documents
- 9. Status of Applicant (please indicate one of the following) (fill in block letters only)
- I. Individual VII. PSU
- II. Partnership VIII. Govt.
- III. Proprietorship IX. Statutory body
- IV. Ltd. Co. X. HUF
- V. Public Inst. XI. NRI
- VI. Society/Association/Trust XII. Foreign National
- 10. Concessional groups (Please indicate one of the following as applicable):
- I. Freedom Fighter IV. Disabled soldier
- II. Gallantory award winner V. Blind person
- III. War Widow
- 11. Payment of registration fee is to be made by Cheque/Pay/Order/Demand Draft only, drawn in favour of "Mahanagar Telephone Nigam Limited, Delhi".
- 12. Contact Telephone No. (If any):

Fax No. (if any)

13. Please specify the facilities required in case of ISDN line (Tick mark).

CLIR CF AGC CUG NSN CH CLIP

(a) No. of Terminals proposed to be

used: (Maximum of Eight ISDN

terminals can be connected to

NT 1)

(b) Type of Terminals proposed to

be connected:

- (i) Simple ISDN Hand Set Yes No
- (ii) ISDN Feature Phone Yes No
- (iii) ISDN PC Card Yes No
- (iv) Terminal Adaptar Yes No
- (v) G4 Fax Terminal Yes No
- (vi) Video Telephone Yes No
- (vii) Video Conferencing Yes No

Equipment (This

requires 3 ISDN

Telephone Lines)

No. 735765 ANNEXURE - V

MAHANAGAR TELEPHONE NIGAM LIMITED NEW MUMBAI

Four Specimen Signature of each person

SPECIMEN SIGNATURES SHEET

Application Form No		SPECIMEN SIGNATURES-1
Regn. No	Dated	
Name of the Applicant		
(in Block Capital Letters)		
Application Form No		SPECIMEN SIGNATURES-2
Regn. No	- Dated	
Name of the Applicant		
(In Block Capital Letters)		
Application Form No		SPECIMEN SIGNATURES-3
Regd. No	- Dated	
Name of the Applicant		
(In Block Capital Letters)		
Application Form No		SPECIMEN SIGNATURES-4
Regd. No	- Dated	
Name of the Applicant		
(In Block Capital Letters)		