

APPLICATION FORM FOR DATA CIRCUIT
(Use separate Form for each circuit)

Application Form No.

BHARAT SANCHAR NIGAM LIMITED
(A Govt. of India Enterprise)
CALCUTTA TELEPHONES

Make all entries in BLOCK letters. Indicate choice by TICK mark. Strike out which is not applicable.

To
The Chief General Manager
Calcutta Telephones.

I /we the undersigned hereby apply for TP/Speech/Data/Leased Circuits in individual capacity/on behalf of my Organization as detailed below under the terms and conditions set forth in the Indian Telephones Rules as amended from time to time.

PART-1

- | | |
|-----------------------------------|--|
| 1. Application No. - | Application Date (dd-mm-yyyy)- |
| 2. Application Type - | <input type="checkbox"/> General <input type="checkbox"/> Service <input type="checkbox"/> Casual |
| 3. Connection Type | - <input type="checkbox"/> Local <input type="checkbox"/> Outgoing <input type="checkbox"/> Incoming |
| 4. Nature of Circuit | - <input type="checkbox"/> Data <input type="checkbox"/> Data-MLLN <input type="checkbox"/> E1-R2 |
| 5. Authority | - BSNL : CGM (CTD) |
| 6. Connection from (dd-mm-yyyy) - | Upto (dd-mm-yyyy) - |

PART-2

	General Information	Details of A-end	Details of B-end
Name			
Premises No.			
Street Name			
Care Of			
Building name			
Sector			
Block			
Flat no.			
City			
Pin code			
State			
Contact Tel No. (STD+Tel No.)			
FAX No. (STD+Tel No.)			
E-Mail address			
Mobile No.			

Date:
Applicant

Signature of the

PART-3

	Mailing Details	Billing Details
	<ul style="list-style-type: none"> • Same as A-end • Same as B-end • Same as General • If not, fill-up this column 	<ul style="list-style-type: none"> • Same as A-end • Same as B-end • Same as General • Same as Mailing details • If not, fill-up this column
Name		
Premises No.		
Street Name		
Care Of		
Building name		
Sector		
Block		
Flat no.		
City		
Pin code		
State		
Contact Tel No. (STD+Tel No.)		
FAX No. (STD+Tel No.)		
E-Mail address		
Mobile No.		
Billing Criteria		<input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly
Status of Applicant		<input type="checkbox"/> Govt. <input type="checkbox"/> Ltd. Co. <input type="checkbox"/> Pvt. Ltd. Co <input type="checkbox"/> Others
PAN/GIR No.		
Co. Regn. No.		

PART-4 (To be filled up in case of Partnership Firms only)1. Partnership Firm - YES NO

2. Name of the partner (1) -

3. Name of the partner (2) -

4. Name of the partner (3) -

**Date:
Applicant****Signature of the**

PART- 5(Technical details)

- 1. Type of Circuit - National International
- 2. Band width (KBPS/MBPS) -
- 3. No. of Wires - 2 4
- 4. Type of User - Single CUG
- 5. Type of Network - Point-to-Point Network
- 6. Purpose - Voice Data Telegraph Fascimile
- 7. Nature of data - Internet POI CCS7 E1R2
- 8. Internet Connection from - BSNL OTHERS
- 9. Name of ISP -
- 10. Circuit required to be terminated on Private Network ... Yes No
- 11. ISP Number -
- 12. Remarks / Comments -
- 13. ISP Address -
- 14. No. of Ports -
- 15. Un-check Internet -

PART- 6 (Network details)

- 1. Name of the Network -
- 2. Approval Date (dd/mm/yyyy) -
- 3. Valid upto (dd/mm/yyyy) -
- 4. Approval details -
- 5. No. of Terminals -
- 6. Network Comments -

PART- 7 (Modem details)

Modem details	A-end	B-end
Modem type		
Available	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
TEC approved	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Manufacturer		
Speed (KBPS / MBPS)		
Will be available from (dd-mm-yyyy)		
Modem owned by	BSNL <input type="checkbox"/> CLIENT <input type="checkbox"/>	BSNL <input type="checkbox"/> CLIENT <input type="checkbox"/>
Cost of Equipment (Rs.)		
Press concession	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
No. of Modems installed by BSNL	<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4

Date:
Applicant

Signature of the

PART- 8 (Documents submitted)

- 1. Network diagram
- 2. Literature of Modem
- 3. Form 60/61
- 4. Network Approval
- 5. Form 14
- 6. Other (if any)

PART- 9 (Not to be filled up by the Applicant)

- 1. Circuit No.
- 2. A/N Number
- 3. A/N Date (dd-mm-yyyy)
- 4. A/N from
- 5. Remarks

**Date:
Applicant**

Signature of the