

CUSTOMER INFORMATION

Company/Office/Applicant's Name: _____ Nationality: _____

The name as it should appear in the directory entry (for Business and Government only)

English: _____ (maximum 50 characters)

Dhivehi: _____ (maximum 40 characters)

FULL ADDRESS AT WHICH SERVICE IS REQUIRED

FULL BILLING ADDRESS (if different)

1. House/Building Name: _____ 1. House/Building Name: _____

2. Road Name: _____ 2. Road Name: _____

3. District: _____ 3. District: _____

4. Block No: _____ 4. Post code: _____

5. Island, Atoll: _____ 5. Island, Atoll: _____

TYPE OF SERVICE REQUIRED

Tick, or state quantity required

1. Install new telephone line(s) ISDN-2 ISDN-30 ISDN-8 Plus (off-Malé only) _____

2. Change existing telephone _____ to ISDN-2 _____

3. Install extension on telephone no. _____

4. Provide additional directory no. _____

5. Install telephone instrument on telephone no. _____

6. Relocate telephone no. _____ in same premise

7. Relocate telephone no. _____ to my new address above _____

8. Become the registered user/owner of the telephone no. _____

Name and Signature of present owner _____

9. Provide/remove Ex-dir service to/from _____

10. Internal wiring of telephone number _____

11. Disconnect telephone number _____

12. Star Lock password 4 digits
(numeric only)

13. Other _____

To be filled by off-Malé customers only

Minimum no. of ISDN channels will be 8 channels (if applying for ISDN-8 Plus)

Specify the number of additional channels required (multiples of 2) [subject to availability of radio capacity]

Has a telephone service been provided previously at this address? Yes No

Previous number(s) (if known) _____

Type of equipment required (if known) _____ Date service required _____

DECLARATION AND SIGNATURES

I/We agree to abide by the Terms and Conditions for Provision of Telecommunications Service by Dhivehi Raajeyge Gulhun Public Limited Company as contained in the current edition of the Telephone Directory and any amendments thereto made from time to time.

Name of Applicant _____ Signature of Maldivian Sponsor _____

ID card No _____ Name of Sponsor (capitals) _____

Permanent Address _____ ID card No _____

Date _____ Permanent Address _____

(Official stamp is required for Offices and Companies)

Note 1 A valid National Identity card for Maldivians and the passport and work permit for non Maldivians is required with application.

Note 2 Non Maldivians are required to pay a deposit or submit a guarantor letter with ID card of the Maldivian guarantor. (The guarantor should be a Dhiraagu account holder with a good payment record for the last 12 months) The guarantor will be responsible for settling all outstanding debts in the event of the customer defaulting on payment.

Note 3 If you are a business and this is your first application, please attach a copy of Business Registration Certificate, together with a completed Business Information Sheet (available at Dhiraagu Customer Front Office)