

## Mobile Number Port In Request Application Form

	Company/Office/Applicant's Name:		National ID Card (for Maldivians) Registration Certificate	
		ID No.		
	Date of Birth: DDDMMMMYYYYYMAIe	Female Exp. Dat	te	
	Nationality: Title:	Reg No.		
	PERMANENT ADDRESS	PRESENT ADDRESS (if different from Permanen	5 / BILLING ADDRESS t Address)	
Z O	House/Building Name:	House/Building Name:		
MATI	Road:	Road:		
CUSTOMER INFORMATION	District: Block No:	District:	Block No:	
IER I	Atoll, Island:	Atoll, Island:		
ISTON	Common Name:			
5	Primary Contact Mobile No:	Alternate Contact No:		
	All communications including bill notifications will be sent to this mobile number  Primary Email:  All communications including bill notifications will be sent to this email address	Alternate Email:		
	APPLICABLE FOR FOREIGNERS ONLY			
	Passport Number:	Exp. Date		
	Work Permit:	Exp. Date		
	Sponsor Name:			
0	UPC:	Donor Operator:		
REQUESTED				
ig	UPC Received Date:	Date of Port in request	:	
VICE RE	Mobile Number (MSISDN):	Current Mobile Service	Prepaid Postpaid	
SER	Rate of current plan (DO Plan):	Change Plan to: (Please attach Postpaid / Pl	repaid application form)	
		Cancel Port in request:		
RES	I/We have read and accepted the Terms and conditions of Number Porting Service and Dhivehi Raajjeyge Gulhun PLC.	ee Note: 1. A valid and non expired ID card for Maldivians and a valid and non expired Passport or work permit for foreigners is required with applications.		
ATU		2. A non-refunda	able fee is applicable for number porting service.	
SIGN		3. Postpaid custo	omers will need to submit a copy of their last bill.	
% NC	Signature / Stamp (Official stamp is required for Offices and Companies)	<ol><li>For Prepaid Customers; any balance talk time/SMS/Data will not be carried forward upon porting.</li></ol>		
DECLARATION & SIGNATURES	For companies, Authorized Signatory (Name, Title & ID Card No.)	<ol><li>Agree to pay all dues to the Donor Operator pertaining to the mobile number sought to be ported till its eventual porting and understands and agrees that in the event of non-payment of any</li></ol>		
DECLA		without prejudic	Donor Operator, the ported mobile number shall, e to any other remedies available to the Donor law for recovery of such dues, be liable to be	
	Date:		the Recipient Operator.	

SIM No:	Phone No:		
Form received by:	Date:	Initial:	
Request updated to portal by:	Date:	Initial:	
Sent for DO Approval Date:	Time:	Initial:	
Application reference number in portal:			
Activated Date:	Time:	Initial:	
Issued Date:			