

Mobile Number Port In Request Application Form

	New Customer Existing Customer Customer No. / Assount No. / See	Identity Document National ID Card Work permit Passport (for Maldivians)
	Customer No. / Account No. / Sen Company/Office/Applicant's Name:	
	сопрану/описе/Аррисанс s наше.	ID No
CUSTOMER INFORMATION	New Customers	
Äχ	Date of Birth: DDD MM M YYYYY Male Female	Account No. / Service No. to be billed on
일	PERMANENT ADDRESS Nationality: Title:	CURRENT ADDRESS (If different from Permanent Address)
监	House/Building name:	House/Building name:
ΣΟ	Road:	Road:
UST		District: Block no:
	District: Block no:	
	Atoll, Island:	Atoll, Island:
	Email:	
	Contact Name: Contact No's:	
TED	UPC:	Donor Operator:
REQUEST	UPC Received Date:	Date of Port in request:
REG		Current Mobile Service: Prepaid Postpaid
	Mobile Number (MSISDN):	Current Mobile Service: Prepaid Postpaid
SERVICE	Rate of current Plan (DO Plan)	Change Plan to (Please attach Postpaid/Prepaid application form)
s		Cancel Port in request
DECLARATION & SIGNATURES	I/We have read and accepted the Terms and conditions of Number Porting Service and Dhivehi Raajjeyge Gulhun PLC. Signature/Stamp (Official stamp is required for Offices and Companies) For companies, Authorized Signatory (Name & ID Card No.) Date:	 A valid ID card for Maldivians and the Passport and Work visa for non Maldivians is required with applications. A non-refundable fee is applicable for number porting service. Postpaid customers will need to submit a copy of their last bill. For Prepaid Customers; any balance talk time/SMS/Data will not be carried forward upon porting. 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 such dues to the Donor Operator, the ported mobile number shall, without prejudice to any other remedies available to the Donor Operator under law for recovery of such dues, be liable to be disconnected by the Recipient Operator.
_	SIM No: PI	none No:
ONLY	Form received by: Date	
USE	Requested updated to portal by: Date	
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		: ————————————————————————————————————
	Application reference number in portal:	
FOR	Activated Date: Time	Initial: ————————————————————————————————————
[L	Issued Date:	