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Tashi InfoComm Limited

Internet Leased Line Service Shifting Form

Client Information

A. Organization/Individual /Billing Details

Name:.....
 Mobile No:..... Phone No:
 Fax No:.....
 Email Id:.....
 Present Address Where ILL is working:

B. Current Bandwidth: _____ Mbps

C. Current Internet Package Type

- Premium
- Standard

Address Where ILL Service to be shifted

Address/ Locality/ Area:

.....

Billing Address (if different from Above):

.....

NOTE:

- One Time Setup Cost will be applicable for shifting ILL service to new location.
- Minimum 5 working days' notice is required.

Signature

(Name:.....)

(Designation:.....)

(Date: ___/___/___)

