

नग्रीबानम्'र्नेव नकुन्'तन्नेवान्नेत्रः हो र्कन्'तहेव॥

Tashi InfoComm Private Limited

POST-PAID SERVICES SURRENDER FORM

Name:	
Address:	
Mobile No	
CID No.	
Effective Surrender Date:	Time
Outstanding Dues: Nu	
Request to our valued Customer (s) Please clear any outstanding bills before complicationslater. Thank You.	rclear any outstanding bills before you surrender our service to avoid any icationslater. Thank You. Thank You. For official use only For official use only For lower Services by: Date
Signature of Customer	
Surrender form accepted by	
For of	ficial use only
Final bill(s) expected to be sent to Custome	er Services by: Date Time
Contact Name:	Contact Phone No.
Products Detached Date:	SIM Detached Date:
Final Payment Received Date:	
Name and signature of sales executive	
Copy to: MIS Billing section for necessary action, plea	ise.

Address: P.O Box # 1502, Samten Lam, Thimphu, Bhutan Phone: +975 77889977 Website: www.tashicell.com