



བགྲིས་བདེ་དོན་བརྒྱུད་འབྲེལ་སྒྲེང་སྡེ་ཚོང་འཛིན།།

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 you surrender our service to avoid any complications later. Thank You.***

Signature of Customer

Surrender form accepted by _____

For official use only

Final bill(s) expected to be sent to Customer 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, please.