

To be filled in BLOCK letters, Please use ballpoint pen while filling to ensure the impression on all copies is clear.

AFFIX PHOTO OF SIGNATORY

Space for photograph. Please sign across, sign should overlap on photo & form

INFORMATION TO ACTIVATE YOUR SERVICES

1. Existing Airtel No. / ID's
2. New Services opted (Mobile, Landline, Internet, FWP, DSL, VSAT, Mobile PCO, ISDN BRI, IPLC, BlackBerry, PRI, MEN, Data Card, E1 R2, MPLS, Mobile Solutions, Video Surveillance, VPN, Lease Line)
3. Organisation Name (SAIF SHAKIR)
4. 1st Contact details (Administration, Billing, Payment, Installation, Residence, Others)
5. 2nd Contact details (End user, Administration, Billing, Payment, Installation, Others)

ADDITIONAL INFORMATION TO SERVE YOUR ORGANISATION BETTER

6. Your Organisation is (Proprietorship, Partnership, Pvt. Ltd., Public Corp., Govt., Others)
7. No. of Employees (1-10, 10-50, 50-100, 100-500, >500)
8. Your Industry is (Banking & Finance, Media, IT/Telecom, Retail, Real Estate & Construction, Services, ISP, Govt./PSU, Consumer Goods, Others)
9. Your Turnover is in (Rs. Millions) (>=5000, 1000-5000, 100-1000, 20-100, <=20)
10. Your Annual Telecom spend (Rs. 000) (<12, 12-30, 30-60, 60-120, >120)
11. Is your Organisation Tax payee () PAN/GIR No: ADNPSXXXXXX

ORDER & PAYMENT DETAILS

12. Services required (USD, CLIP, GPRS, International Roaming)
13. Tariff Plan (AES 248)
14. Features Required (STD, ISD, Hello Tunes)
15. Other VAS's 1, 2
16. Parallel Wiring, Internal Wiring, Phone Instrument, WiFi
17. CPE (Instrument/Modem etc) Type (CLI / Non CLI / Cordless / NT)
18. CPE reqd for Single / Multiple Computers (USB / LAN Port)
19. Directory Listing required
20. Installation Address Type (Rented, Leased, Owned)

Payment Details
21. Amount (No's required, Regn/Activ, Others#1, Others#2, Grand Total)
22. Paid by (Cash / Cheque / DD / Card)
23. Cheque / Card No. (NA)
24. Issued By
25. Cheque Date, Card Expiry Date
26. Receipt No.

YOUR ORGANISATION SPECIFIC REQUIREMENTS

27. I / We Would be using this connection for (Telemedicine / Tele-banking / Tele-education / Tele-trading / E-commerce / Network Operating Centre)
28. I / We Would be using this connection for the Telemarketing (Please fill the Telemarketer Undertaking)
29. Do you wish to register for NDNC to avoid unwanted commercial communication?
30. Bill Mode (Paper Bill, eBill, E-mail id for ebill)
31. Preferred Contact Language
32. Web Login (Selfcare) required
33. Bill payment mode (ECS, SI)
34. For Multiple connections, specify Mobile [] No's, Phone & DSL [] No's, Data Circuits [] No's
35. For Multiline connections, specify the Billing in (One Account, All Separate Account No)
36. Annexure(s) to this form
37. Would you like to receive advertisement from us on your Airtel mobile/connection ()

38. Place, Date
39. Proof of Address, Registration Proof, Others

FOR AIRTEL USE ONLY

40. Sales Reference No.
41. Mobile no (98450XXXXXX), SIM No (8991XXXXXX)
42. I / We hereby confirm, to have met the customer and duly verified the photograph, signatures, all details on the form and documents given in the relationship form with their respective originals and the form has duly signed by the applicant in my presence. Further, I/We hereby undertake and confirm that the form is completely and correctly filled and that the activation of the connection/ SIM card is done only after verification that all necessary documents are in order.
Account Manager OR FSE Name/code
Dealer Name, Code
Activation Manager OR Project Manager Name, Date/Time (DDMMYY)
Bharti Airtel Limited : Registered Office : Aravali Crescent, 1, Nelson Mandela Road, Vasant Kunj, Phase II, New Delhi- 110 070, India
Circle Office: No.55, Divyashree Towers, Bannerghatta Road, Bangalore - 560 029.

Version:1.1, April 2008.

WHITE: Bharti Airtel Limited COPY, PINK: CUSTOMER COPY, YELLOW: CHANNEL COPY

Form No. 60*
Form of Declaration to be filled by a person who does not have either Permanent Account Number or General Index Register Number and who makes payment in cash in respect of transaction specified in clauses (a) to (h) of rule 114B.
1. Full Name and Address of the Declarant:
2. Particulars of Transaction:
3. Amount of Transaction:
4. Are you assessed to tax: Yes / No
5. If yes, (i) Details of Ward/Circle/Range where the last return of Income was filed, (ii) Reasons for not having Permanent Account Number/General Index Register Number
Details of documents being produced in support of address in column (1)
Verification
I do hereby declare that what is stated above is true to the best of my knowledge and belief. Verified today, the Day of 200.

Form No. 61*
Form of Declaration to be filled by a person who has agricultural income and is not in receipt of any other income chargeable to income-tax in respect of transaction specified in clauses (a) to (h) of rule 114B.
1. Full Name and Address of the Declarant:
2. Particulars of Transaction:
3. Details of documents being produced in support. Yes/No.
I hereby declare that my source of income is from agriculture and I am not required to pay any income tax from any other income, if any.
Verification
I do hereby declare that what is stated above is true to the best of my knowledge and belief. Verified today, the Day of 200.