


DIGITAL CABLE SERVICES PVT. LTD
 THEKKUMTHALA BUILDING, AZAD ROAD, KALOOR, KOCHI - 17
 bhoomikadigitalcable@gmail.com

CRF No. :

Date :

DETAILS OF CUSTOMER

Applicant's Name :

Installation Address :

House No. :

Rd No. :

Area. :

City :

Contact Details : Tea. L : Mob:

E-mail ID :

CABLE OPERATOR NAME	
CABLE OPERATOR CODE	
DISTRIBUTOR ADDRESS	
STB. No.	
CAD No.	

TYPE OF CUSTOMER a) Residential b) Commercial 1) Hotel 2) Office

3) Others Please Specify.....

ADDRESS PROOF a) Passport b) Electricity Bill c) Tel. Bill d) Ration Card

3) Others Please Specify.....

Space for STB Sticker

Space for TV + Card Number

Any Scheme based (Please Specify):

Pay Mode : Cash Cheque* / DD in Rs.

Chq / DD. No. _____ Date _____ Installation Charge (non Refundable) _____

Bank Name _____ STB One Time Rent _____

Branch _____ Amnt. in Rs _____ Sales Person Name _____

STB Company _____

*Subject to realisation of Cheque / Outstation Cheque will not be acceptable.

Date.....

Subscriber Signature.....

FOR OFFICE USE ONLY

Customer Code :

Set Top Box No :

Installation Team No :

Card No. :

Distribution Name :

LCO Name :

LCO
STAMP

DISTRIBUTOR
STAMP