

CLIENT SERVICE REQUEST APPLICATION FORM

Date:	CSRAF#: Ruksa – CSRAF 01
	Normal (Including Tax) / Exclude Tax
Customer Type	
Customer Name	
Company Name	
P.O.BOX Address:	
Area /Town, State:	
Mobile #:	Home Phone #
D/License /Passport #	Work Phone #
Personal Email	
Connection Type:-	
2. Mikrotic PTP Model I	Name:Name:Name:Name:Name:Name:Name:
Broadband Plan Name:	
Plan Speed:	
Monthly Price:	
Payment Method Selected:	- (tick one)
Cheque Bank I	Deposit Wire Transfer
Tigo Pesa 0677200024	
Hosting Package &Domain Name Registration required: Yes No	
If Yes, Name of Domain to Register:	
Note:	