



Beeline™

ընտրվի՞ր կյանքի պայծառ կողմը

Sales and Customer Care Office (name)

Application on provision of lump-sum services of telephone communication to citizens

Last name		Passport	
First name		Series	No
Petronymic		Place of issue	
Date of birth		Date of issue	
Place of birth			
Registration address town/region/village			
street		building	apt.
Telephone installation address			
town/region/village		street	
building		apt.	
Type of residence			
<input type="checkbox"/> Residence building/ apartment		<input type="checkbox"/> Hostel	
<input type="checkbox"/> Private house			
Status of territory			
<input type="checkbox"/> Telephonized			
<input type="checkbox"/> Not telephonized			
Documents verifying property right for territory			
<input type="checkbox"/> Passport		Registration date	
<input type="checkbox"/> Lease contract		Copy is attached	
<input type="checkbox"/> Document verifying property		Copy is attached	
<input type="checkbox"/> Other			
Privilege (number of document verifying the privilege, discount rate)			
When and by whom the document is provided:			
Client request		Please, conclude a contract of telephone communication	
<input type="checkbox"/> Installation	<input type="checkbox"/> Reinstallation	<input type="checkbox"/> naming on other person	
<input type="checkbox"/> Change of number	<input type="checkbox"/> Withdrawal	<input type="checkbox"/> naming on family member	
<input type="checkbox"/> Other			

Particular notes	
Client previous address	
<input type="checkbox"/> Existance of telephone № (74 _____)	<input type="checkbox"/> here is no telephone
Telephone number of previous address	
<input type="checkbox"/> Is registered under Client name	
<input type="checkbox"/> Is renamed on family member	
<input type="checkbox"/> Is renamed on other person	
<input type="checkbox"/> The contract is dissolved	
Charge for provided services	<input type="checkbox"/> is totally payed <input type="checkbox"/> is not payed
<i>Upon requets of Client provide the service of number selection</i>	
<input type="checkbox"/> Selected number (74 _____)	<input type="checkbox"/> Without selection
Signiture of Client	Date
Contact telephone number	

Date of application submission	Application registration number (case)
Waiting list	
Per address	Per ATE
Other notes	
Signiture of Sales and Customer Care Office specialist	