BTRC Form: 2006

Finger Print
(Left/ Right Thumb)



REGISTRATION FROM

(Pre-Paid/ Post-Paid/ PSTN/ IPTSP/ Others:....

Two Passport Size
Photographs to be
Attected by 1st Class
Gazetted Officer/
Operator's Represntative/
Authorised Seller

Form Serial No:			Issue	d IP Phone No:
1. *User: Individual's/ Company's Name:				
2. *Users Name (In case of Company):	. 0			
	0			
3. User's Date of Birth:/				
4. Gender: Male/ Female:				
5. Occupation:				
6. Nationality:	National ID Number			
7. Permanent Address:	••••••			
8. Present Address:				
9. Contact No: Tel: Mobile)·	Fax:	E-mail:	Any Other:
10.*Fathers Name: (In Bangla)			(In English)	
11. *Mothers Name: (In Bangla)			(In English)	
12. *Husband/ Wife's Name (if married): (In Bangla)			(In English)	
13. Second Contact: (Name & Address)			Mob/ Tel No:	
14. All Mobile/ Land Phone Numbers under	r his/ her posse	ssion:		
15. Photo Identity Document:				
(ID Card/ Driving Licence/ Gun Licence	e/ Passport/ B11	RC form: 2006 (A)/ Ai	ny Other Identity I	Oocument with Photo)
Providers Representative/ Authorised	Seller		User	
I have perdonally verified the attached photograph and identity			I hereby declare that the information given above is correct. In case of any false Information. I sall be liable to appropriate legal action.	
of the applicant.			of any false info	mation. I sall be liable to appropriate legal action.
Sign with Seal:			Sign:	
Name and Address:			Date:	
Date:			Sale (If Comp	any):
Note: 1. The Applicant must complite all serials of this Form and any inco 2. For item serial 15, orginal ID to be presented before the sewller is to be presented before the seller and attested photocopy of t	and attested photography o	cepted. If thesame should be submitted. If the	applicant doesn't have the "Pho	to Identity Document", then duly filled up BTRC form:2006(A)
3. In case of asterisk(*) mark, information regarding Bangladeshi cit	izens to be given both in Ba	angla and in English.		
		'Part-B'		
1. Company Authorized Person:			Designation	1
2. Contact Number:				
	Т	his part to be filled by o	ffice	
3. Type of Suscription: Pre-Paid	Oth	ners	Post-Paid	Others
4. Segment Name:			Package:	
5. Mother ID/ Unic ID (Reference Mobile Number)			Type Of Busin	ess:
6. Type of Industry:		IP Phone Number	0 9 6 1	4
7. Seller's Name:		IP Address		
8. Seller's ID:	••••••		TL	_
9. Seller's Contact No:		MAC/ IMEI Address	IK.	
10. Selling/ Re-registration Date:	,	Paid Amount		
11. Bulk Subscription List: Yes*	No	In Words		