В ООО « Манго Телеком»

ЗАЯВЛЕНИЕ

на переоформление номера

**Я**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Фамилия Имя Отчество

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Лицевой счет

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| **Абонент – физическое лицо** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Паспорт:** | | |  | **Серия:** | | | |  | | | | | | **Номер:** | | | | | |  | | | | | | | | | |
| **Кем выдан:** | |  | | | | | | | | | | | | | | | **Когда:** | | |  | | | | | | | |
| **Адрес регистрации (с индексом):** | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
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| **E-mail:** |  | | | | | | | | | | | | | | | **Кодовое слово:** | | | | | | |  | | | | |
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| **Контактный телефон:** | | | | | **8** | | **(** | |  |  |  | **)** |  | |  | | |  |  | |  |  | |  |  |  |  | |

Передаю права пользования номером/ми : \_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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Организации \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(полное наименование организации, соответствующее учредительным документам)

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| Подпись абонента |  | «\_\_\_\_\_» |  | 20\_\_\_ г. |

**Организация**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(полное наименование организации, соответствующее учредительным документам)

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| **Абонент - Юридическое лицо/Индивидуальный предприниматель** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ИНН** |  |  | | | | | | | | | **КПП:** | |  | |  | | | | | | | | | | |
| **Юридический адрес (с индексом):** | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **E-mail:** | |  | | | | | | | | | **Кодовое слово:** | | | | | | |  | | | | | | | |
|  | |  | | | | | | | | |  | | | | | | |  | | | | | | | |
| **Контактный телефон:** | | | **8** | **(** | |  |  |  | **)** |  | |  | |  | |  |  | |  |  |  |  |  |  |  | |
| **Контактное лицо:** | | |  | | | | | | | | | | | | | | | | | | | | | | |

Прошу установить тарифный план и пакет на связь: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Дата переноса номера/ов:

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Дата выключения предыдущей/их ВАТС:

Руководитель организации

(представитель с правом подписи) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ФИО Подпись

**М.П.** «\_\_\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20 \_\_\_г.

***C условиями обслуживания, стоимостью услуг, в частности со следующим, ознакомлен(а/ы) и согласен(на/ны):***

***\* Переоформление услуги производится с установочным платежом***

***\* Настройки  при переоформлении услуги не переносятся***

***\* Сроками предоставления услуг***