В ООО « Манго Телеком»

ЗАЯВЛЕНИЕ

на переоформление номера

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

(полное наименование организации, соответствующее учредительным документам)

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**Лицевой счет**

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

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

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

(полное наименование организации, соответствующее учредительным документам)

Руководитель организации

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

ФИО Подпись

**М.П.**

**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***