





#### 4. Total Amount Payable

Amount payable for Set Top Box (Item no.	Total STB Hardware	Rs. _____
Amount payable for Channel Packages (Item no.	Total Selected Channels (A + B)	Rs. _____
		Rs. _____
	<b>Total Amount Payable</b>	<b>Rs. _____</b>

#### 5. Payment Details

\* subject to realisation

Mode of Payment (DD/Cash/ Online)	Bank & Branch	Amount (Rs.)

#### Instructions

1. The applicant's name & address must be given in full. 2. In case of non-individual applicants, i.e. Companies, Pvt. Firms, Institutes etc. please also provide the name of the contact person 3. Submission of this form indicates that this choice selection supersedes all previous choices made. Incomplete forms will be returned and without any action. 4. The CAF Number will be a system generated number. 5. This is not an invoice. The invoice will be provided to subscriber later after the bill cycle completion 6. Subscription will start from the date of activation of STB.

#### FOR OFFICE USE ONLY

CAF No. \_\_\_\_\_

Operations:	User ID _____ LCO Code _____ Date of Receipt _____	Account No. _____
	Telephone Verification done by _____ on _____ Telephone no. _____	
Accounts:	User ID _____ Lot No. _____ Batch No. _____ Bank A/c. _____	
	Verification details provided: Ration Card/ Voter ID Card / Passport _____	
Verified by:	_____	
Remarks:	_____	