



Tonga Communications Corporation

TELEPHONE SERVICE Application Form

CUSTOMER INFORMATION

1. **Customer Name:** **Business** **Residential**
(Hingoa Kakato) (Pisinisi) (ʻApi Nofuʻanga)

2. **Occupation:** **Photo ID:**

3. **Billing Address:** **Fax:**

4. **Email Address:** **Mobile:**

5. **Contact Person:** **Contact Telephone:**

6. **Address for Installation:**

DO YOU OWN or RENT THE ADDRESS ABOVE:

(Ko ho 'api 'eni 'e tu'u ai e telefoni pe ko e nofo totongi?)

OWN **RENT** **OTHER**
(Ma'u 'Api) (Nofu Totongi) (ʻUhinga Kehe)

DIRECTORY ENTRY

(Fokotu'u ki he Tohi Telefoni)

Name (Family/ First) <small>Hingoa (Hingoa Fakafamili/ Hingoa 'Uluaki)</small>	Business Description <small>(Pisinisi)</small>	Address <small>(Tu'asila)</small>
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SERVICE REQUIRED (Please Tick)

Telefoni Sevesi 'oku fiema'u (Kataki 'o faka'olunga'i ho'o fiema'u)

- Direct Line for Local and Inter-Island
- Direct Line with International Access
- Fax Line
- Direct Line for Switchboard
- Mobile Cellular
- Fixed Cellular
- Silent Number
- Other _____

FOR OFFICE USE ONLY:

Work Order No. 1 : /___/___/___/ - /___/___/ - /___/___/

Work Order No. 2 : /___/___/___/ - /___/___/ - /___/___/

Work Order No. 3 : /___/___/___/ - /___/___/ - /___/___/

Work Order No. 4 : /___/___/___/ - /___/___/ - /___/___/

Work Order No. 5 : /___/___/___/ - /___/___/ - /___/___/

Do you have a Telephone Line at the above address at present?

(ʻOku 'i ai ha Laine Telefoni 'i he Tu'asila 'oku ha atu 'i 'olunga 'i he lolotonga ni?)

Yes **No**
(ʻIo) (ʻIkai)

Any Telephone Line Permanently Disconnected in the above address?

(Na'e 'i ai ha telefoni kuo 'osi tu'usi 'i he tu'asila 'i 'olunga)

Yes **No**
(ʻIo) (ʻIkai)

Is there any amount Outstanding in respect of Telephone Bill in your name?

(ʻOku 'i ai hao mo'ua telefoni 'i ho Hingoa?)

Yes **No**
(ʻIo) (ʻIkai)

DECLARATION (FUAKAVA)

I agree to pay ALL charges and to submit to all regulation in force, with respect to the hire, rent or use of telephone and associated equipment, which are the property of the Tonga Communications Corporation. The information provided above is true and correct and if such information is incorrect I agree to bear any cost which the incorrect information may cause and I understand and agree that TCC has the right to immediately disconnect my telephone services if I have provided any misleading or false information. I will be liable for any unauthorized usage of the telephone service should the system unconsciously allowed.

(ʻOku ou fakaha heni 'oku ou loto lelei keu totongi 'a e ngaahi totongi koloa pe te u miumui ki he ngaahi tu'utu'uni kotoa fekau'aki mo hono haea pe ngaue'aki 'o e telefoni pea mo hono ngaahi me'angaue, 'a ia ko e ngaahi koloa 'a e Kautaha Fetu'utaki 'a Tonga. Ko e ngaahi fakamatala kotoa 'oku ha atu 'i 'olunga 'oku mo'oni mo tonou pea ka 'oki 'ikai tonou 'a e ngaahi fakamatala ko 'eni, 'oku ou loto ke u fua ha fakamole 'a ia 'e hoko 'o makatu'unga 'i he fakamatala 'ikai tonou ko 'eni, pea 'oku ou lave'i mo loto lelei ki he tonou 'a e Kautaha Fetu'utaki 'a Tonga ke tu'usi 'eku telefoni 'o kapau kuo u fakaha ha fakamatala takihala pe 'ikai mo'oni. Teu loto ke totongi hano ngaue hala'aki 'a e telefoni 'okapau 'e 'iai ha taimi 'e malava tu'unga'a pe 'a e telefoni 'o fakahoko ha sevesi na'e 'ikai 'ataa ke ngaue'aki. Fakatatau ki he ngaahi tu'utu'uni moe founga ngaue 'a e TCC)

Signature: **Date:**/...../20.....

FOR OFFICE USE ONLY:

Work Order No. /___/___/___/ - /___/___/ - /___/___/ **W/O Date:** ____/____/20____

TCC Officer: _____ **Complete Date:** ____/____/20____

For Official Use Only

FINANCE SECTION

a. Is there any amount outstanding in respect of the applicant? Yes/ No

b. If there is any amount outstanding, please state:

\$..... Check by:

Chief Accountant: Date:/...../ 20.....

ENGINEERING SECTION

a. How many waiting lists are in this area, before this application

b. Date:

Send to Planning:// 20.....

Received from Planning:// 20.....

Received from Finance:// 20.....

c. Telephone Number Allocated: Date:// 20.....

d. History Number Allocated *(please give details)*:

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e. Installation FEE Detail:

Amount: \$.....

Receipt No.

Date:// 20.....

Controller Sales & Marketing: Date:/...../ 20.....

PLANNING SECTION

a. Application Feasible? *(please circle)* Yes/ No

b. Total Number of Lines available in the Area before assigning this line:

c. Was there any ? *(please circle)* Yes/ No
(if Yes please give details below)

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d. Cable Information:

MDF.....

CAB No. E D

DP No. Telephone Number Allocated:

Engineer Line & Cables: Date:/...../ 20.....

APPROVED BY:

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For General Manager, Tonga Communications Corporation

Date:/...../ 20.....