



National Centre for
Information Technology

Application for GNM Connectivity Services

• GNM Relocation / Disconnection •

For more information please call 334-5050 or email helpdesk@ncit.gov.mv

CUSTOMER INFORMATION

Organization			
Contact Name			
Contact No.	Fixed:	Mobile:	Fax:
E-mail Address		Date	

SERVICE REQUIRED

GNM RELOCATION / DISCONNECTION

<input type="checkbox"/> Relocation		<input type="checkbox"/> Disconnection		
Type of Organization	<input type="checkbox"/> Government Org.	<input type="checkbox"/> School	<input type="checkbox"/> Justice/Court	<input type="checkbox"/> Gov. Company
	<input type="checkbox"/> Police	<input type="checkbox"/> Other _____		

CURRENT LOCATION

Building Name	
Street Name	
Post code	
Atoll, Island	

NEW LOCATION (If Applying for Relocation Service)

Organization	
Building Name	
Street Name	
Post code	
Atoll, Island	

AUTHORIZATION BY THE CUSTOMER

Name		Official Stamp
Designation		
Signature		
Date		

FOR NCIT USE ONLY

Form received by		Date/Time	/		
Assigned to		Service No.			
Site No.		CPE Type	Serial No.		
CPE Interface	Untrust IP:		Trust IP:		
Type of Access	<input type="checkbox"/> SFR	<input type="checkbox"/> SF	<input type="checkbox"/> MFR	<input type="checkbox"/> MF	<input type="checkbox"/> ADSL