ANNEX 3D.2 – CONDITIONAL APPROVAL

ANNEX 3D.2

ORDER FOR DISTRIBUTION FRAME	
The Requesting Operator	
Date of Application	[Date] Application Reference Number [Number]
Number of DF Vertice	cal Requested [No.]
Address of MDF	[Address]
	[Address] MDF Number [MDF No.]
On Behalf of the Rec	questing Licensee
Sign	
Name	[Name] Name of Requesting Licensee [Company Name]
Designation	[Designation]
Department	[Department Name]
Contact Number	[Telephone Number] Company Stamp
Fax Number	[Fax Number]
SingTel's Reply to the Requesting Operator Application returned - incomplete/illegible Not Approved Reason for Rejection [Reason]	
☐ Approved	Number of MDF Vertical allocated [No.]
	SingTel Approval Code [Approval Code]
On behalf of SingTe	
Sign	Contact Number [Telephone Number]
Name	[Name] Fax Number [Fax Number]
	Date [Date]
Processing Status	
Received Date	[Date] Queue Status [Queue No] Processed Date [Date]