

ANNEX 3D.2

ORDER FOR DISTRIBUTION FRAME		
The Requesting Operator		
Date of Application	[Date]	Application Reference Number [Number]
Number of DF Vertical Requested	[No.]	
Address of MDF	[Address]	
	[Address]	MDF Number [MDF No.]
On Behalf of the Requesting 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		
<input type="checkbox"/>	Application returned - incomplete/illegible	
<input type="checkbox"/>	Not Approved	Reason for Rejection [Reason]
<input type="checkbox"/>	Approved	Number of MDF Vertical allocated [No.]
	SingTel Approval Code	[Approval Code]
On behalf of SingTel		
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]