

Public IP Request Form

(Note: One Public IP request per form.
Form may be sent to support-ndcsp@nic.in)

1. Project Name : _____
2. Project Owner Organization : _____
Group/ Division : _____
3. Project Handling Unit (If Applicable)
Organization : _____
Group/ Division : _____
4. Name of Application : _____
5. URL : _____
6. Private IP of server : . . .
7. Functionality of server : _____
8. Operating system of server : _____
9. Security Audit Clearance Certificate obtained from NIC (Yes/ No) :
10. Vulnerability Assessment done (Yes/ No) :
11. Deployment Architecture submitted (Yes/No) :
12. Backup has been configured for the Project (Yes/No) :
13. Antivirus installed in the servers (Yes/No) :

Signature of End User / NIC Coordinating Group

Name: _____ Date: _____ Place: _____

Mob. No. _____ e-mail: _____

Note: Access to public IP services will be enabled only after obtaining security audit clearance from NIC-HQ Cyber Security Division .