

**.GOV.PH DOMAIN APPLICATION FORM**

Please send the accomplished form at dns@dict.gov.ph
For inquiries, you may call us at 63 2 89200101 ext 6113

COMPLETE NAME OF ORGANIZATION	
COMPLETE ADDRESS OF ORGANIZATION	
TELEPHONE NUMBER	
FAX NUMBER	
REQUESTED .GOV.PH DOMAIN NAME	
PURPOSE OF REQUEST (If your request is an inter-agency initiative or project, please include the purpose of the initiative/project. You can use separate paper if the space provided is not enough.)	
NAME SERVER INFORMATION	
HOST NAME OF PRIMARY NAME SERVER	IP ADDRESS OF PRIMARY NAME SERVER
HOST NAME OF SECONDARY NAME SERVER	IP ADDRESS OF SECONDARY NAME SERVER
HOST NAME OF OTHER NAME SERVER (if applicable)	IP ADDRESS OF SECONDARY NAME SERVER
1. 2. 3.	1. 2. 3.
AUTHORIZED CONTACT PERSON/S	
MAIN CONTACT PERSON	
NAME:	POSITION:
EMAIL ADDRESS:	MOBILE NUMBER:
ALTERNATE CONTACT PERSON	
NAME:	POSITION:
EMAIL ADDRESS:	MOBILE NUMBER:

I hereby certify that the information provided in this form are true and correct.

PRINTED NAME AND SIGNATURE
HEAD OF ORGANIZATION

DATE

**NOTE: Please wait for an email notification from the .gov.ph Domain Administrator regarding your application.
The notice will be emailed to the authorized contact person/s you indicated in this form.**