Server co-location Form

General Information

Organization’s Name

Department

Project Name

Focal Person Name

Designation

Contact Number

Tel: ____________________________ Ext.: ________ Mobile: ____________________________

Email

Asset Information

Server Specification

- Rack size of Server*: 
  - 1U
  - 2U
  - [ ]

- Make & Model of Server:

- Hardware configuration: Please enclose server configuration sheet along with this form

Software Environment

- Operating System (with version):

- Software & Tools:

Server Category: [ ] Web [ ] Database [ ] Email [ ] Others if any specify._________________

Port no. that need to be open to access from outside:________________________

Type of IP Address Required

[ ] Public IP

[ ] Private IP

Signature of Focal Person _______________ Date: _______________

For the Purpose of GIDC

<table>
<thead>
<tr>
<th>IP Allocated</th>
<th>Switch Label</th>
<th>Port No.</th>
<th>Patch Panel</th>
<th>Rack No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public</td>
<td>____________</td>
<td>_______</td>
<td>___________</td>
<td>_______</td>
</tr>
<tr>
<td>Private</td>
<td>____________</td>
<td>_______</td>
<td>___________</td>
<td>_______</td>
</tr>
</tbody>
</table>

If Multiple IPs ________________________________

Checked By: ___________ Approved By: ___________