

## ICT TECHNICAL ASSISTANCE FORM

(Note: Please read the attached instruct	rions before filling out this form)
COMPLETE NAME OF ORGANIZATION	Mote- Cabe
COMPLETE ADDRESS OF ORGANIZATION	MOTE BUILDING, BGC COMPOUND, 184-9, COTABATO CHY
TYPE OF ORGANIZATION	☐ Ministry ☐ Agency ☐ Office ☐ Special Project ☐ Consortium / Organizations / Groups
TELEPHONE / MOBILE NUMBER	
FAX NUMBER	
NATURE OF REQUEST (Please refer to the instruction attach to this form)	☐ Tech Support ☐ Device Setup ☐ Communication ☐ Account Security ☐ Cloud Services ☐ Remote Assistance ☐ Maintenance and troubleshooting
INFORMATION (Briefly Indicate the problem you have encounter. Continue on separate sheet if necessary)	well-the blocked by BICTO www.cabb.bangsamoro.gov.ph
	TECHNICAL CONTACT PERSONS
PRIMARY TECHNICAL CONTAC	
NAME: ABOUL NAZEET D.	ALANGCA POSITION: CHIEF TRANS PORTATION REGULATION
	@gmail.com MOBILE NUMBER: PERIGNATE 0904 440 3512
ALTERNATE TECHNICAL CONT	TACT PERSON
NAME: IAN S. PINGUIAL	MAN, CPA POSITION: CTRO
EMAIL ADDRESS: Ringuiamant	an agmail.com MOBILE NUMBER: 0945 743 4123

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

PMUHAMEAD MAGOLO

Date signed: DATE



NOTE: Please send the accomplished form at isdms@bicto.bangsamoro.gov.ph. For inquiries, you may call us at 09653848388. Please wait for an email notification from the bangsamoro.gov.ph Domain Registrar regarding your application. The notice will be emailed to the authorized contact person/s you indicated in this form.

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