



DNS Hosting Service Application Form

(Note: Please read the attached instructions before filling out this form)

Agency Information

Complete Name of Agency	
Complete Address of Agency	
Region	Fax Number
Telephone Number / Mobile Number	

Technical Contact Person

Name	Mobile Number/s
Position/Designation	Email Address

Alternate Technical Contact Person

Name	Mobile Number/s
Position/Designation	Email Address

Domain Records

Name / Host / Alias	TTL	Record Type	Priority	Value /Answer / Destination

Example:

Name / Host / Alias	TTL	Record Type	Priority	Value /Answer / Destination
i.gov.ph	86400	A	N/A	192.168.0.1
www	86400	CNAME	N/A	i.gov.ph
i.gov.ph	14400	MX	10	ce-mail.i.gov.ph
gwhs.i.gov.ph	14400	A	N/A	192.168.0.1

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

Name and Signature
Head of the Organization

Date

NOTE: Submit this application form together with your Letter of Intent (LOI) to dns@dicti.gov.ph. Both documents should be in PDF format. Please wait for an email notification from DICT Help Desk regarding your application. The notice will be emailed to the main technical contact person you indicated in this.

INSTRUCTIONS IN FILLING OUT DNS HOSTING SERVICE APPLICATION FORM

1. All fields in the form must be filled out. If not applicable, write N/A.
2. Entries in the form may be filled out by typing or by handwriting. If handwritten, please write legibly.
3. Indicate the **COMPLETE** name of your agency. **DO NOT ABBREVIATE** (e.g. *Department of Information and Communications Technology*).
4. Indicate the **COMPLETE** address of your agency (e.g. *C.P Garcia Ave., Diliman, Quezon City*).
5. Indicate the **registered .gov.ph domain name** of your Agency (e.g. *dict.gov.ph*).
6. There should be two (2) technical contact person and should be an employee of your agency. Technical contact from a third party is **NOT** allowed. Each technical contact person should have different phone numbers and email addresses.
7. Indicate your Domain Records. You can refer to the examples in the form. If you don't have other entries, just indicate your .gov.ph domain name in the Name/Host/Alias.
8. Tick the box "I hereby certify that the information provided above is true and correct."
9. The Agency Head or MIS head must affix his/her signature over printed name and indicate the date when the form was signed. For Local Government Units, forms should be primarily signed by the Municipal Mayor/Provincial Governor, if not accommodated the Municipal Administrator/Provincial Administrator, or MIS Head should sign.
10. Submit the scanned copy (in PDF format) together with the letter of request to dns@dict.gov.ph.



DNS Hosting Service Application Form

(Note: Please read the attached instructions before filling out this form)

Agency Information

Complete Name of Agency Department of Information and Communications Technology	
Complete Address of Agency DICT Building, C.P Garcia Ave., Diliman, Quezon City	
Region NCR	Fax Number N/A
Telephone Number / Mobile Number 8-920-0101	

Technical Contact Person

Name Francisco Rivera	Mobile Number/s 09199610352
Position/Designation Computer Programmer III	Email Address rivera.francisco@gmail.com

Alternate Technical Contact Person

Name Gregorio Salvador	Mobile Number/s 09174309617
Position/Designation Computer Maintenance Technologist II	Email Address salvador.gregorio@gmail.com

Domain Records

Name / Host / Alias	TTL	Record Type	Priority	Value /Answer / Destination
www agency.gov.ph	86400 14400	CNAME MX	N/A 10	agency.gov.ph ce-mail.agency.gov.ph

Example:

Name / Host / Alias	TTL	Record Type	Priority	Value /Answer / Destination
i.gov.ph	86400	A	N/A	192.168.0.1
www	86400	CNAME	N/A	i.gov.ph
i.gov.ph	14400	MX	10	ce-mail.i.gov.ph
gwhs.i.gov.ph	14400	A	N/A	192.168.0.1

☒ I hereby certify that the information provided is true and correct.

(Please refer to the instructions page for authorized signatories)

Name and Signature
Head of the Organization

01/01/2022

Date

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