



.GOV.PH DOMAIN MODIFICATION FORM

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

CHANGE IS APPLICABLE FOR: (select which is applicable)

✦ NAME SERVER INFORMATION

✦ AUTHORIZED CONTACT PERSON

COMPLETE NAME OF ORGANIZATION	Municipality of Orani, Bataan		
COMPLETE ADDRESS OF ORGANIZATION	Barangay Centro 1 Orani, Bataan		
TELEPHONE NUMBER	(047) 237-0930		
FAX NUMBER	N/A		
.GOV.PH DOMAIN NAME	orani.gov.ph		
NAME SERVER INFORMATION			
HOST NAME OF PRIMARY NAME SERVER		IP ADDRESS OF PRIMARY NAME SERVER	
murphy.gov.ph			
HOST NAME OF SECONDARY NAME SERVER		IP ADDRESS OF SECONDARY NAME SERVER	
mike.gov.ph			
HOST NAME OF OTHER NAME SERVER (if applicable)		IP ADDRESS OF SECONDARY NAME SERVER	
1. elmo.gov.ph		1.	
2.		2.	
3.		3.	
AUTHORIZED CONTACT PERSON/S			
MAIN CONTACT PERSON			
NAME: KHRISTIAN HAROLD P. VICENTE		POSITION: OIC-MISO	
EMAIL ADDRESS: vicentekhristian@gmail.com		MOBILE NUMBER: 09275109013	
ALTERNATE CONTACT PERSON			
NAME: EDLIN S. TURLA		POSITION: Admin Aide III(Network Admin)	
EMAIL ADDRESS: edlinturla@yahoo.com		MOBILE NUMBER: 09152800596	

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

EFREN E. PASCUAL JR.

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.



DNS Hosting Service Application Form

Agency Information

Complete Name of Agency	MUNICIPALITY OF ORANI BATAAN
Complete Address of Agency	Barangay Centro I Orani, Bataan
Region III	Fax Number
Telephone Number / Mobile Number	(047) 237-0930

Technical Contact Person

Name KHRISTIAN HAROLD P. VICENTE	Mobile Number/s 09275109013
Position/Designation OIC-MISO	Email Address vicentekhristian@gmail.com

Alternate Technical Contact Person

Name EDLIN S. TURLA	Mobile Number/s 09152800596
Position/Designation ADMIN AIDE III(Network Admin)	Email Address edlinturla@yahoo.com

Domain Records

Name / Host / Alias	TTL	Record Type	Priority	Value /Answer / Destination
orani.gov.ph		CNAME		orani.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 are true and correct.

EFREN E. PASCUAL, JR.

Name and Signature
Head of the Organization

Date _____

NOTE: Submit this application form together with your Letter of Intent (LOI) to helpdesk@i.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.



Web Hosting Service Application Form

Agency Information

Complete Name of Agency	MUNICIPALITY OF ORANI BATAAN
Complete Address of Agency	Barangay Centro I Orani, Bataan
Region III	Fax Number N/A
Telephone Number / Mobile Number	09275109013

Main Technical Contact Person

Name KHRISTIAN HAROLD P. VICENTE	Mobile Number/s 09275109013
Position/Designation OIC-MISO	Email Address vicentekhristian@gmail.com

Alternate Technical Contact Person # 1

Name EDLIN S. TURLA	Mobile Number/s 09152800596
Position/Designation Admin Aide III(Network Admin)	Email Address edlinturla@yahoo.com

Alternate Technical Contact Person # 2

Name Alfred Louie Cotaco	Mobile Number/s 09154521556
Position/Designation Admin aide I	Email Address alfredcotaco0@gmail.com

Website Information

IMPORTANT. PLEASE READ.

For agencies applying for hosting of several websites, **replicate this page** for the information of each website.

Do you have an existing website?

☐ Yes ☒ No

Complete Domain Name	Computing Platform
Scripting/Programming Language(s) used	Database Platform

CMS used, if any put mark ✓ inside the box:

☐ WordPress

☐ Joomla

☐ Drupal

☐ Others: _____

Plugins/Modules/Extensions installed, if any

Other Server Requirements:

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

EFREN E. PASCUAL, JR

Name and Signature
Head of the Organization

Date

NOTE: Submit this application form together with your Letter of Intent (LOI) to helpdesk@i.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 form.