



.GOV.PH DOMAIN APPLICATION FORM

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

COMPLETE NAME OF ORGANIZATION		
COMPLETE ADDRESS OF ORGANIZATION		
REGION		
TELEPHONE NUMBER / MOBILE 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 OTHER NAME SERVER	
1.	1.	
2.	2.	
3.	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 is true and correct.

PRINTED NAME AND SIGNATURE
HEAD OF ORGANIZATION

DATE

NOTE: Please send the accomplished form at dns@dict.gov.ph. For inquiries, you may call us at 8-920-0101 ext 6113. Please wait for an email notification from the .gov.ph Domain Registrar regarding your application. The notice will be emailed to the authorized contact person/s you indicated in this form.

INSTRUCTIONS IN FILLING OUT .GOV.PH DOMAIN 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 through handwriting or computer. If handwritten, please write legibly.
3. To know if you are qualified for a .gov.ph domain sub-delegation, please read the Philippine Government Internet Domain Name Policy (<https://dns.gov.ph/asti-policy/>)
4. Indicate the **COMPLETE** name of your organization. DO NOT ABBREVIATE (e.g. Department of Information and Communications Technology).
5. Indicate the **COMPLETE** address of your agency (e.g. C.P Garcia Ave., Diliman, Quezon City).
6. Indicate the requested **.gov.ph** domain name of your agency. The **.gov.ph** domain name should **NOT** contain special characters (e.g. dict.gov.ph).
7. If you are applying for DNS Hosting Service of DICT, please indicate the following in the name server information fields. No need to indicate the IP Addresses of the name servers.
 - * Primary name server: *murphy.gov.ph*
 - * Secondary name server: *mike.gov.ph*
 - * Other NS: *elmo.gov.ph*Else, indicate your name servers' host names and their corresponding IP addresses. A minimum of two (2) name servers are needed for a domain.
8. There should be two (2) authorized contact persons and should be an employee of your agency. Authorized contact person from a third party is **NOT** allowed. Each contact person should have different phone numbers and email addresses.
9. Tick the box "I hereby certify that the information provided above is true and correct."
10. 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.
11. Submit the scanned copy (in PDF format) together with the letter of request to dns@dict.gov.ph



.GOV.PH DOMAIN APPLICATION FORM

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

COMPLETE NAME OF ORGANIZATION	Department of Information and Communications Technology
COMPLETE ADDRESS OF ORGANIZATION	DICT Building, C.P. Garcia Ave., Diliman, Quezon City
REGION	NCR
TELEPHONE NUMBER / MOBILE NUMBER	8-920-0101 / 09199610352
FAX NUMBER	N/A

REQUESTED .GOV.PH DOMAIN NAME	agency.gov.ph
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.)	The Department of Information and Communication Technology is requesting for a domain name for the purpose of creating a website which will be used to disseminate information to the public and transparency.

NAME SERVER INFORMATION	
HOST NAME OF PRIMARY NAME SERVER	IP ADDRESS OF PRIMARY NAME SERVER
murphy.gov.ph	202.90.154.181
HOST NAME OF SECONDARY NAME SERVER	IP ADDRESS OF SECONDARY NAME SERVER
mike.gov.ph	202.90.158.241
HOST NAME OF OTHER NAME SERVER (if applicable)	IP ADDRESS OF OTHER NAME SERVER
1. elmo.gov.ph	1. 175.41.160.78
2.	2.
3.	3.

AUTHORIZED CONTACT PERSON/S	
MAIN CONTACT PERSON	
NAME: Francisco Rivera	POSITION: Computer Programmer III
EMAIL ADDRESS: rivera.francisco@gmail.com	MOBILE NUMBER: 09199610352
ALTERNATE CONTACT PERSON	
NAME: Gregorio Salvador	POSITION: Computer Maintenance Technologist II
EMAIL ADDRESS: salvador.gregorio@gmail.com	MOBILE NUMBER: 09174309617

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

(Please refer to the instructions page for authorized signatories)

PRINTED NAME AND SIGNATURE
HEAD OF ORGANIZATION

01/01/2022

DATE

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