NIXI CONNECTION FORM

Kindly complete this connection form to enable us to provide you connection. This information allows the NIXI to perform the necessary admin, configuration and wiring work to allow you to connect.

Name of NIXI location:

Member Contact Information:							
Installation Site		Please provide details.					
Company Name		Main Contact					
Site Address		Phone					
		Fax					
		Mobile					
		Email					
Pincode							
1 110000		To whom questions regarding the service					
Technical Contact on Site		should be addressed					
Contact Name		Position					
Phone		Fax					
Mobile		Email					
Out of Hours Reporting	,I		tails of contact whom NIXI can				
		contact in the event of service problems					
		outside of working hours.					
Contact Names		24 hour contact numbers					
Do you need consolid locations?(If connecte locations)							
Billing Contact		Provide details to whom invoices will be sent					
Billing Contact		Position					
Address		Phone					
		Fax					
		Mobile					
		Email					
		GSTIN					

NIXI Service Details:								
1. Access Circuit								
Size of Circuit e.g. 10 mbps, 100 mbps & 1000 mbps,10								
Gbps								
Circuit Provider								
Expected date by which circuit provisioned								
If you are providing your own circuit, please specify delivery date:								
O. Denter Detelle								
2. Router Details								
Dedicated Router Details	(Owned, sup	plies a	nd co-loc	ated a	at NIX	(I)		
Height in U	Height	in		Dept	th in r	mm		
	Inche	es .		-	•			
Make and Model:						,		
3. IP Addressing (NIXI)	will provide	one IP	address	;)				
From where were these of	btained?							
Is your current IP address space?		Provider			Provider			
		Dependent			Independent			
					(Po	rtable)	
What are the assigned ac	ddress							
range(s)?								
Current peering Connectivity								
Marcharla na NIVI na arian a anna ativita (a da 14.0 a a 0)								
Member's pre-NIXI peeri	Member's pre-NIXI peering connectivity (select 1,2, or 3)							
1.Member has no peering								

2.Member has a single peering. Specify which one:

3.Member has multiple peering). Specify which:

Member's peering with NIX	XI will be (select 1or 2): 1.NIXI will be the sole peering provider to the Member. 2.Member will have multiple peering providers, including NIXI and:(Specify which)						
BGP Information							
AS number used for peerin							
List of AS numbers the app to announce in a peering w							
List of IP address range applicant would expect to announce in a peering with NIXI members							