

Private IP / IP Subnet Request Form

Requester's Section			
Requested By		Request Date	
Requester Email ID		Requester Contact No	
Department Name & Address		Development Agency/SI organization Name & Address	
No of Workstation Servers & Network devices		No of Private IPs Required	
Justification for Request (Please provide the detail of IP requirements)			
Remarks(if any)		Required till date (Expiry date)	
Requested By [Sign, Name and Date]			

Approver's Section			
HPSDC Project Manager [Sign, Date]		SDC Nodal Officer [Sign, Date]	

Admin's Section (HPSDC Operator)			
Assigned to		Call ID	
Required till date (Expiry date)			
Effective Completion Date			
Completed by [Sign and Name]			
Remarks (if any) by Admin Group			

Note :- Access to network would be given only after antivirus is installed and definition is updated to latest.

The complete filled form, duly signed by the request owner, and approved from HPSPDC Nodal Officer & Project Manager, may be submitted at HPSPDC Helpdesk.

For any assistance, call on +91-7807401412, helpdesk.hpsdc@hpmail.gov.in

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