

## VM Creation Request Form

### Requester's Section

Requested By		Request Date	
Requester Email ID		Requester Contact No	
Department Name & Address		Development Agency /SI organization Name & Address	
Functionality of VM			
Operating system of VM			
Justification for VM Creation			
Requested By [Sign, Name and Date]			

### Approver's Section

HPSDC Project Manager [Sign, Date]		HPSDC Nodal Officer [Sign, Date]	
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### Admin's Section (HPSDC Operator)

Assigned to		Call ID	
VM Name		VM Host Name	
Local IP address			
Effective Completion Date			
Completed by [Sign and Name]			
Remarks (if any) by Admin Group			

The complete filled form, duly signed by the request owner, and approved from HPSDC Nodal Officer & Project Manager, may be submitted at HPSDC Helpdesk.  
For any assistance, call on +91-7807401412, [helpdesk.hpsdc@hpmail.gov.in](mailto:helpdesk.hpsdc@hpmail.gov.in)

**Department of Digital Technologies & Governance, IT Bhawan,  
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HPSDC/FR/43

Internal

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