

Customer Contact Form

(To be filled in black in with BLOCK Letters. Fields marked with * are mandatory)

Agency Details

Agency Abbreviation/ Code	
Parent Ministry	
Name of Agency/ Department*	
Primary Address*	
Telephone Number*	
Email Address	

Administrative Details

Name of Accounting Officer*	
Designation*	
Primary Address	
Address of Location to be Connected*	
Geographical Coordinates of Location	
Email Address	
Telephone Number*	
Mobile Number*	

Key Technical Contact Person

Name of Technical Officer	
Designation	
Primary Address	
Email Address	
Telephone Number	
Mobile Number	

Services Requested

Service	Service Details
Internet	
Private Leased Circuits (PLC)	
Public IP Address	
Mobile Data Device (Mifi)	
Web and Email Hosting	
Video Conferencing Suite	
Virtual/ Cloud Services	
Data Centre Services	
Satellite Services (VSAT)	
Electronic Data Management Service	
ICT Consultancy	

Declaration: I hereby declare that the information provided by me above is true and correct to the best of my knowledge and belief. I also confirm that in the event of any information provided by me is found incorrect / is incomplete and in the event of any violation of Government Regulation related to the supply of Services, the NDMA will be within its right to discontinue supply to my agency.

Name, Signature and Official Stamp

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