

Application form

Subject: Request of admission to the ANIX

The undersigned (name) acting as Legal Representative for (company name) (“Company”) with registered office in (city), (state/country), (address)....., Fiscal Coderequests to be admitted to the ANIX. The Company declares that it has reviewed the Technical regulations of ANIX and that it has the mandatory requisites. In particular, it declares that:

- 1.It owns an Autonomous System: AS
- 2.It owns an independent Internet access.

Once submitted, the form will be automatically sent to the ANIX team who will deal with your request.

Applicant details

Legal name of company	
Registered address	
Principal contact person	
Official web site	
Billing details	
Accounts contact name or role	
Billing Address (if different)	
Telephone	
Email address	

Network Operations Centre Details

NOC contact name/role	
NOC email address	
Office Hours Telephone	
NOC web page	
NOC Hours: 24 x 7 / 8 x 5 / Other (please specify)	
Peering Information:	
Autonomous System number	
Peering request email address	
Peering Web URL	
Approximate number of prefixes	

Connectivity

Port Speed *

10Mbps 100Mbps 1Gbps 10Gbps

Place and date	
First and last name	
Title	
Company	
Signature	