Computer Section

SAHA INSTITUTE OF NUCLEAR PHYSICS

Application for IP address allocation of wired network devices.

Full Name of the Applicant (in block letters)

Employee ID	:
E-mail ID	:
Division/Section	:
Extn.	:
Room No.	:
Building	:
Wall Outlet I / O No. where device is connected	:
MAC address of device (in block letters)	:
Authorised by: Not required by Faculty Members Signature of Head	Signature of the applicant with date of the Division/Section where computer / device is located with date
 Applicants may kindly note the following ✓ The network may have to be brought down at short notice because of urgent system maintenance or other reasons. ✓ Changing the IP address allotted without consent from the Computer Section will lead to device being disconnected from the LAN. ✓ Moving an IP address enabled device without intimation from the Computer Section will lead to device being disconnected from the LAN. 	
[For office use only]	
IP Address allotted	I / O No.
Signature	Panel Port No