Bangladesh Submarine Cable Company Limited (BSCCL)
APPLICATION FORM FOR LEASED INTERNET BANDWIDTH
REGISTRANT'S INFORMATION

Name of Registration Company	:	
Name of the Authorized Person with Designation	:	
Address	:	
City and Post Code	:	
Email Address	:	
Phone and Fax Numbers	:	
Registration Category	:	☐IIG ☐ISP ☐ Others (please specify). ------------------ ---
Order Type	:	☐New Order ☐Upgrade ☐Downgrade
Connection Type	:	☐ Long-term ☐Short-term ☐ Temporary
For Long-term, Initial Commitment Period	:	☐2-3 years☐3-4 years ☐5 years More than 5 years

BILLING CONTACT INFORMATION

If this information is the same as in the Registrant information, you may fill this part with details of the Finance team (CFO), please complete this section.

Full Name/Designation	:	
Organization	:	
Address	:	
City and Post Code	:	
E-mail Address	:	
Phone and Fax Numbers	:	

NOC INFORMATION

NOC Contact (phone/cell)	:	
NOC e-mail address	:	
NOC address	:	
Emergency Contact & e-mail address	:	

CONNECTION INFORMATION

Connection Address

Customer Name	:	
Connection Address	:	
Phone & Fax numbers	:	
Email Address	:	

TECHNICAL INFORMATION

Required bandwidth (Mbps)	:	
Port type	:	☐ 1 G ☐ 2 x 1 G ☐ 4 x 1 G ☐ 10 G
AS Number and IP block (if any)	:	
Description of End Equipment (With model no, Please use separate sheet if needed)	:	
Port Level Redundancy*	:	☐ With ☐ Without
Purpose of Connectivity	:	
Justification of bandwidth requirement (Please use separate sheet if needed)	:	
IP Address Need for Host [BSCCL will not provide IP addresses with this bandwidth. IP addresses may be procured separately from BSCCL]	:	☐ Yes ☐ No (if yes please follow the prescribed application form)
IP Route Announcement	:	☐ Default Route (You should add the default route to your router; there is no need to run any routing protocol) ☐ BGP (If this option is selected, please use letterhead pad to provide BGP related information)

* This will bear extra charge.

Signature of authorized Person
of the registrant with seal, (if any) : _____   Date : _____

FOR OFFICIAL USE ONLY
Registration Information

Registration Number	:		Demand Note No.	:	
Date	:		Date	:	

Circuit Designation	:	
Date of Connection	:	

Signature of BSCCL Authorized Personnel: _____   Date: _____