

Government of India
Department of Information Technology, MCIT
NATIONAL INFORMATICS CENTRE

Application for LDAP Authentication From User Application Server

(Please read the instructions given in the reverse of this page; The completed application form, duly signed by the concerned person from the Application Department Countersigned by NIC Project Coordinator /HOD of the concerned NIC Cell, should be submitted to Support Center at “iNOC, A4B2 Bay, A-Block C.G.O. Complex”). **Please use CAPITAL LETTER and Sign on each page. All entries are mandatory. ACCESS WILL BE GIVEN TO SITES ENABLED OVER HTTPS ONLY**

1. Name of The Application : _____
2. Application URL : _____
3. Server IPs : Base IP _____ Service IP _____ Server Location: _____
4. Domain/Group Of People who will access this application: _____
5. Name of The Applicant : _____
- (From User Department) (Dr./Mr./Ms. First name Middle Name Surname)
6. Designation : _____
7. Min./Dept./Org : _____
8. Address for correspondence : _____

_____ City _____ Pincode: _____

Telephone Number: (O) _____ (R) _____ Mobile: _____

9. NIC E-mail address of the Application : _____
10. Is the application enabled over https: YES/NO (tick as appropriate)
11. Is the application security audit cleared: YES/NO (tick as appropriate)
12. If not cleared by audit, give date by when it will be cleared : _____

This is to declare that I have read the terms and conditions given on the next page and agree to abide by them. I shall be the single point of contact in case required. I will be responsible for any misuse of the service/ violation of the clauses mentioned below. NIC reserves the right to deactivate the service in case of any violation.

ALL Entries are mandatory.

Signature of the Applicant with date and seal

FOR OFFICE USE

Account Category: Free/ Paid

If free, on What Basis: _____

If paid, Project No. : _____

Signature of NIC Coordinator/HOD

Name & Designation: _____

E-mail _____ Tel. _____ Mobile _____

User ID Activation:

Application login ID: _____ has
been activated for the LDAP Authentication
Service.

Signature of the In charge
Name & Desig.: _____

OBLIGATIONS AND RESPONSIBILITIES of APPLICATION USERS from CONCERNED DEPARTMENT/ MINISTRY

1. Concerned Department/ Ministry shall be solely responsible for all the information, contents, data send and received using NIC LDAP Authentication under this Agreement. Concerned Department/ Ministry further acknowledges that it shall be solely responsible and undertake to maintain complete authenticity of the information/data sent and/or received and takes all possible steps and measures to ensure that consistent authentic information is transmitted.
2. Concerned Department/ Ministry shall keep the account information such as userid, password provided obtained for LDAP Authentication in safe custody to avoid any misuse by unauthorised users.
3. I will take one id per application. ID assigned for authentication with one application will not be used by another application. I understand the risks involved . I hereby authorize NIC support cell to deactivate the id in case of misuse/abuse.

This is to declare that I have read the terms and conditions given above and agree to abide by them. I shall be single point of contact in case required. I will be responsible for any misuse of the service/ violation of the clauses mentioned below.

Signature of the Applicant with date and seal