5.1 Network Connectivity Form

On Member's letterhead

Date:
To,
The Membership Department
Multi Commodity Exchange of India Ltd
Exchange Square,
CTS No. 255, Suren Road, Andheri East
Mumbai – 400093

Member Name:
Member ID:

Network Connectivity Preference

☐ MPLS ☐ Point to Point

Application Type

APPLICATION TYPE	Tick √
New Order	
Shifting	
Surrender	
Upgradation	
Downgrade	
No Objection Certificate (NOC) for Private Point to Point Leased Line	

Details of site are as follows: -

Sr. No.	Description	Details
1	Service Provider	
2	Bandwidth * (applicable for MPLS / Point to Point)	
4	Connectivity Installation Address ***	
5	City & PIN code	
6	District and State	
7	Contact person Name	

Sr. No.	Description	Details
8	Mobile Number of Contact Person	
9	Contact Number with STD code	
10	FAX Number	
11	Email Address	
12	Feasibility of the location checked with the Exchange	YES / NO
13	IP Address ****	

**Bandwidth to be mentioned for shifting of MPLS / Point to Point connectivity and in case of upgrade of leased line connectivity please mention from and to bandwidth.*
**** In case of shifting please mention new address.*
***** Mandatory for shifting / upgrade / downgrade/ surrender application.*

Name of Service Provider for additional connectivity.

Preference – 1	Preference -2

We hereby confirm that the installation address mentioned above is (please tick the option as applicable)

- Registered Office Address of the Member
- Branch Office address of the Member
- Address of our Registered Authorized Person (AP) with the Exchange
- Third Party Datacenter

Thanking you.
Yours faithfully
For ……. (Name and signature of the authorized signatory with Company seal)