

## New Host Application Form

**ATTENTION: Dr. Subrata Chattopadhyay**

**Personal Information**

 Title:  Mr.  Miss.  Mrs.  Other \_\_\_\_\_ Full Name: \_\_\_Raveendran  
 \_\_\_\_\_

Photo ID card No.: \_\_\_\_\_ 3016 \_\_\_\_\_ Email: \_\_\_\_\_ ravi@iit.com \_\_\_\_\_

 Are you an existing user  Yes User cert. no: \_\_\_1E(31)\_\_\_\_\_

 No (If No you must complete [Request for User Certificate Process](#))

Subscriber signature: \_\_\_\_\_

Please fill out the host/services request information.

For User	Registration Authority (RA) Section
CSR No. <u>140112</u> Hostname & Location <u>_gridfs_</u> FQDN: <u>_gridfs.ctsf.cdac.org.in_</u>	<input type="checkbox"/> Accept <input type="checkbox"/> Reject Comment: _____ _____
CSR No. _____ Hostname & Location _____ FQDN: _____	<input type="checkbox"/> Accept <input type="checkbox"/> Reject Comment: _____ _____
CSR No. _____ Hostname & Location _____ FQDN: _____	<input type="checkbox"/> Accept <input type="checkbox"/> Reject Comment: _____ _____

**\*\* Attach additional new host request forms if necessary\*\***

**RA Section:** *(To be filled by RA)*

RA Name: \_\_\_\_\_

RA Organization: \_\_\_\_\_

RA Signature: \_\_\_\_\_ CAO Signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Contact Information**

 IGCA Garuda Grid Operation Centers Certificate Authority,  
 #1, CDAC Knowledge Park,  
 Old Madras Road, Byappanahally, Bangalore – 560 038, INDIA.  
 Tel. +91-80-25246353, 2524 4059 Fax. +91-80-2524 7724  
 Contact IGCA Manager : igca@cdacb.ernet.in