



IP Address Request

(ARIN Justification Form)

Only required for /27 blocks (30 IP's) & above.

1800 N Grand River Ave
 Lansing MI 48906
 517.999.9999
 Fx: 517.999.3993
 www.acd.net

I. Company Information			
Company Name:		Phone:	
Accnt #(If existing):		Fax:	
Technical Contact:		E-Mail	
Service Information: (check appropriate service(s) that apply)			
Service: <input type="checkbox"/> New <input type="checkbox"/> Existing	<input type="checkbox"/> New IP Block	<input type="checkbox"/> Replace Existing Block	<input type="checkbox"/> Addition to Existing Block
<input type="checkbox"/> In-Building Ethernet (IBE)	<input type="checkbox"/> On-Net	<input type="checkbox"/> Co-location	<input type="checkbox"/> Dedicated Internet Access

II. Current IPv4 Address Space Utilization							
Please list your current IP Address space (if any), including space from ACD.net and/or other ISP's.							
Network	Size	Assigned By	Assign Date	% in use			
IP Addresses Guide:							
CIDR Prefix:	/24	/25	/26	/27	/28	/29	/30
IP Addresses:	254	126	62	30	14	6	2

III. IPv4 Address Space Request (Please allow 3-7 business days for processing of your request)				
Please list your requested IP Address space below.				
Total Number of IP Addresses Needed (use guide above)	Immediate Usage	3 Months Forecast	Route Destination Address	Reason for Use
Describe your planned usage of the requested IPv4 address space. If you are providing webhosting services and are doing IP-based hosting, please provide a list of technical reasons why named-based hosting cannot be done.				
How would you like your space advertised? <input type="checkbox"/> Statically Routed Customer <input type="checkbox"/> Customer Advertised BGP				
Do you intend to use ACD.net's DNS servers? No Yes				
Do you wish us to provide default reverse DNS? No Yes				
Do you wish reverse DNS to be delegated? No Yes Nameserver(s):				
Do you intend to run your own mail server? No Yes				



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IV. Additional Comments

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V. Optional Information

How would you like your space advertised?	<input type="checkbox"/> Statically Routed Customer	<input type="checkbox"/> Customer Advertised BGP
Do you intend to use ACD.net's DNS servers?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Do you wish us to provide default reverse DNS?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Do you wish reverse DNS to be delegated?	<input type="checkbox"/> No	<input type="checkbox"/> Yes Nameserver(s):
Do you intend to run your own mail server?	<input type="checkbox"/> No	<input type="checkbox"/> Yes

**Please return the completed form to your ACD.net Account Executive or the Network Operations Center.
Failure to provide the requested details may cause a delay in provisioning your IP Address Space Request.**

Requested Authorization:

By signing this document I agree to be bound by ARIN's IP assignment policy as administered by ACD.net. I am requesting the smallest possible amount of address space possible necessary for my present and future needs. I understand that should I not reach the utilization thresholds prescribed by these policies, I may have my address space reassigned to a smaller block. I also have read and agree to be bound by ACD.net's AUP and network management policies.

Printed Name:		Title:	
Signature:		Date:	