



IP Address Request Form

Internet Services

Account Information

Account Name _____ Account Phone Number (BTN) (_____) _____

Technical Contact _____ Phone (_____) _____ E-mail _____

Installation Address _____ Suite/Floor _____

City _____ State _____ ZIP Code _____

Account Fax Number (_____) _____

Solutions Engineer _____ SE Phone (_____) _____

Broadview Networks IP Address Policy

The issuance of globally routed IP addresses from Broadview Networks to customers is subject to ARIN rules. Blocks of 16 or more require a one-time set up charge. IP addresses may not be resold or reassigned and use is contingent upon a contract for Broadview Networks Internet products. Customers must provide a justification plan explaining IP address usage in accordance with the guidelines as outlined here and in accordance with ARIN rules. Customers must use 60% of what they request within one week of installation. For example, a week after installation Broadview must be able to ping at least 10 out of a block of 16 IP addresses. Customers must use 80% of their addresses before Broadview Networks will issue additional addresses. A usage figure of 80% (13 used out of 16, for example) should be achieved within 3 months and sustained on a continued basis or IP addresses may be withdrawn. Broadview Networks may conduct audits using ICMP to verify these usage thresholds. Broadview will notify customers via email prior to any withdrawal of addresses. Customers whose addresses are withdrawn may be reassigned smaller blocks of addresses. Please ensure the accuracy of supplied contact information to enable proper notification.

IP Address Justification

An **IP justification plan** is required for IP addresses to be assigned. Simple port mapping can be described in the space provided below. Please attach network plans or diagrams on a separate sheet. **Please provide the following:**

- 1) **A list of hostnames:** provide a detailed functional description of the network (i.e. mail server, firewall, web server etc.) If the hosts cannot be "pinged" at the time of installation, a time frame when they can be "pinged" should be included. Please provide any port mapping necessary.
- 2) **A network plan:** showing machine utilization and/or customer links, expected growth in the future, etc.

Select One of the Following IP Address Blocks

	Number of IP Addresses	Monthly Fee*		Number of IP Addresses	Monthly Fee*
<input type="checkbox"/>	1 for WAN (Using NAT. Please supply port numbers and IP addresses of servers the ports will be mapped to.)	Free	<input type="checkbox"/>	32 (29 usable)	\$30
<input type="checkbox"/>	4 (1 address for Firewall or Proxy)	Free	<input type="checkbox"/>	64 (61 usable)	\$60
<input type="checkbox"/>	8 (5 usable)	Free	<input type="checkbox"/>	128 (125 usable)	\$125
<input type="checkbox"/>	16 (13 usable)	\$20	<input type="checkbox"/>	256 (253 usable)	\$250

* Monthly Fee as shown plus \$99 one-time set up fee applied to blocks of 16 and more. Please allow 3-5 working day(s) for approval and IP allocation.

SE: Submit this form with IP Services Order Form or deliver directly to assigned Service Delivery Manager.

Authorized Signature _____ Date ____/____/____

Print Name _____ Title _____

Internal Use Only					
Request Approved:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Address Space:		PVC:
Approved By:			Reason:		

Customer Initial _____