

CONTACT MODIFICATION FORM

Domain Name : _____

I authorize Ardhosting.com to modify the following contact details for my domain name :

Please tick as required

| | Existing Details | New Details |
|---------------------------------------|----------------------|----------------------|
| <input type="checkbox"/> Name | <input type="text"/> | <input type="text"/> |
| <input type="checkbox"/> Company Name | <input type="text"/> | <input type="text"/> |
| <input type="checkbox"/> Email ID | <input type="text"/> | <input type="text"/> |

I am requesting for this change because

Attached herewith are the following documents to validate my request : (please tick)

- Company proof (Certification of Incorporation, Government Issued Registration Certificate/Document)
- Valid Government issued photo ID proof containing my signature (Passport Copy, Driver's License, ID Card)
- Other documents as requested by the Compliance Team of PublicDomainRegistry in the support request.

Signature of the Current Domain Owner

Signature of the New Domain Owner