

APPLICATION TO NZRS Ltd
FOR CONNECTION TO the .nz Registry.

Please complete the details below.

Registrar Details	
Registrar Name <i>(formal name of Registrar's legal entity)</i>	
Registrar Trading Name <i>(if different to above, the trading name of the registrar)</i>	
URL <i>(the registrar's web address)</i>	
WHOIS Public Contact Details <i>(contact details about a Registrar that will be displayed in the public WHOIS queries)</i>	
Name <i>(Registrar Trading Name)</i>	
Address Line 1	
Address Line 2 <i>(optional)</i>	
City	
Province <i>(optional)</i>	
Country Code	
Post Code <i>(optional)</i>	
Phone: <i>CountryCode-AreaCode-LocalNumber</i>	
Fax: <i>(optional)</i>	
E-mail Address	
NZRS Contact Details <i>(These contact details used by NZRS for day to day communications with the Registrar)</i>	
Name of main contact	
Address Line 1	
Address Line 2 <i>(optional)</i>	
City	
Province <i>(optional)</i>	

Country Code	
Post Code (optional)	
Phone: <i>CountryCode-AreaCode-LocalNumber</i>	
E-mail Address (s) (<i>more than one may be supplied for receiving Registry news, technical updates, outage info etc</i>)	
Default Technical Contact Details (<i>Note: these contact details will be used as a default if domain name technical contact details are not supplied</i>)	
Name (<i>Main person dealing with the SRS</i>)	
Address Line 1	
Address Line 2 (optional)	
City	
Province (optional)	
Country Code	
Post Code (optional)	
Phone: <i>CountryCode-AreaCode-LocalNumber</i>	
E-mail Address	
NZRS Billing Contact Details (<i>Contact details used by the NZRS for invoicing the Registrar. Please complete if different to SRS contact details above</i>)	
Name	
Address Line 1	
Address Line 2 (optional)	
City	
Province (optional)	
Country Code	
Post Code (optional)	
Phone: <i>CountryCode-AreaCode-LocalNumber</i>	
E-mail Address (s)	

I affirm that Domain Name Commission has approved the organisation as an Authorised Registrar. Yes / No

I understand that the NZRS will require demonstration of ability to use the registry system. Yes / No

I have attached NZ bank account details and authorisation form for a [direct debit](#) Yes / No

For Foreign Registrars: a foreign Authorised Registrar can choose between the Direct Debit of a NZ Bank Account option or a nominated NZRS bank account that NZRS operate on your behalf:

I would like details on the nominated NZRS bank account that NZRS operate. Yes / No

I agree to report any material issue, technical or non technical, in a timely manner to the NZRS with regard to the registry system. Yes / No

I have attached two signed copies of the [.nz Connection agreement](#) Yes / No

A soft copy of the Registrar Public Encryption Key or CSR has been sent to support@nzrs.net.nz as an attachment. Yes / No

I have read and understood the [NZRS Technical Statement](#). Yes / No

Signed for and on behalf of **[name of Registrar]**

(insert name of person signing)

(Date)

(Position)

Please send a signed copy to:

NZRS Ltd.
PO Box 24361
Wellington
New Zealand