

# DOMAIN NAME COMMISSION

*This form is issued by Domain Name Commission Limited (DNC or Domain Name Commission) on behalf of Internet New Zealand Incorporated (InternetNZ)*

## APPLICATION FOR RELEASE OF ZONE FILE

Please complete this form electronically, then print, sign, and return to The Domain Name Commission, at:

Domain Name Commission Limited  
P O Box 11881  
Wellington 6142  
New Zealand

Or email to [info@dnc.org.nz](mailto:info@dnc.org.nz)

**Complete this section if you are requesting information on behalf of an organisation:**

1. Name of organisation.

2. Trading name (if applicable)

3. Name of contact person.

4. Address

5. Phone (day)

6. Phone (mobile)

7. Phone (after hours)

8. Fax

9. Email

10. Nature of Business

11. Reason for requesting the zone data:

12. What will the information be used for?

13. Why does the information have to be obtained from the zone data?

14. How often do you require the zone data?



15. How long after receipt of the zone data will information from it be publicly released?

16. What information will be made public and in what format?

17. Define what "public good" purpose the information will be put to:

18. Do you want to retain the data after the using it for the reason specified in this application?

Yes/ No

19. If yes, why?

20. What measures are in place to protect registrants' rights and information?

ZTP1

21. What, if any, privacy contracts etc. have the staff in your organisation, or any contractors, signed up to?

22. Any other factors/ comments?

**Declaration**

I, ....., of ..... organisation:

- declare that all the information provided in this application is true and complete
  
- agree that the DNC can make any inquiries necessary to confirm the nature of my business
  
- acknowledge that the registrants' rights are paramount and undertake to ensure that my organisation will protect those rights
  
- agree to be bound by an agreement reflecting this application
  
- agree to be subject to the .nz policies in respect of any investigation, and accept that sanctions may result from any breach of this agreement

Signed \_\_\_\_\_

Print name \_\_\_\_\_

Date \_\_\_\_\_