

## FORM OF ALLOCATION - DNA2

Please complete this form if, under the previous system, through unaccredited agents, or through accredited providers who did not bill their customers directly. Complete the form electronically, then print, sign, and return to The Domain Name Commissioner, at:

Office of the Domain Name Commissioner  
InternetNZ  
Private Bag 11881  
Wellington

1. Please read the following statements and sign in confirmation at the bottom of the page.
- a) I declare that I contacted only those people with whom I had an existing business relationship.
- b) I Declare that I included the following statement in my communication with my customers:   
*"You are under no obligation to sign this Agreement. If you decide not to sign there will be no change to your current services, or terms and conditions of those services, provided by us."*
- c) Declare that the attached list of domain names, name holder ID's, and proof of the date and time the name holder signed the contract, is a true and accurate list.
- d) Request that the Domain Name Commissioner, on behalf of InternetNZ, transfer the attached names from Domainz to my Registrar Identification on the Shared Registry System.
- e) Agree to indemnify Domainz and InternetNZ in the event of the registrant making any claim as a result of, or in any way arising out of, the assignment of a domain name to me.

**Signed:**

**Date:**

**Print full name:**

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