**Annexure-I**

Format for availing cloud services

To

The Managing Director

Info Tech Corporation of Goa Limited IT HUB, 3rd Floor, Altinho, Panaji – Goa

Date:

**Organization Details**

|  |  |
| --- | --- |
| Organization Name: |  |
| Organization Address:  |  |
| HOD Name: |  |
| Contact No:  |  |
| Nodal Officer Name:  |  |
| Designation:  |  |
| Contact No:  | + 91   |
| E-Mail:  |  |
| Selected Empanelled agency with CSP  | Agency Name: |
| CSP Name:  |
| Cloud Services availed for:  |  |

Remarks (if any): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature with Seal (HOD):