

National Informatics Centre
Data Centre and Web Services Division
Storage Allocation/Additional Space Request Form

Project Name	
Server Name	
Operating System	
File System Type	
Clustered/ Non Clustered	
Reason for storage Requirement	
Space allocated (GB)	
Space in Use (GB)	
Space Required (GB)	

Group/Division :

Administrator's Name :

Email :

Phone :

Intercom :

Signature of HOD
Name :

Designation:

Date :

For
IDC Staff

Signature of HOD
(DC & WSD)

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For SAN Administrator Use Only

PORT	CU	LDEV	LUN	ACP	SIZE	REMARKS

HBA type :

HBA driver version :

WWN Number :

Host Name :

SAN Switch Number & Port :

SAN Switch Zone Name :