

Static IP Request Form

BPS Networks can provide a single static IP address per customer at a charge of \$5.00 per month. Please allow for up to 5 working days for BPS to configure a static IP once the request has been approved.

Please state the reason why you require a static IP address:

Technical Contact Name: _____

Technical Contact E-Mail Address: _____

Technical Contact Telephone Number (business hours): _____

Technical Contact Telephone Number (24x7): _____

Please state the WAN MAC Address of the device that will be directly connected to the internet connection: _____

Do you require a specialized reverse DNS entry for this static IP assignment: _____

If yes, please state the FQDN (Fully Qualified Domain Name):

Please read and initial the following:

I understand and agree that BPS maintains a dynamic border firewall and that BPS is under no obligation to modify or remove an IP address, port or net block from the border firewall to allow communication with an IP address, port or net block that has been blocked.

Initial: _____

I understand and agree that BPS may revoke the static IP address assignment without notice for any reason including but not limited to – abuse complaints, suspicious network traffic, inordinate bandwidth consumption or suspected illegal activities.

Initial: _____

I understand and agree that BPS may change the static IP address assignment for any reason with at minimum 5 working days notice.

Initial: _____

IP Address Assigned: _____

Address Assigned VIA:

Static DHCP Entry: _____

Router: _____

MAC Address: _____

PPPoE: _____

Username: _____

Password: _____

CPE Set Static: _____

Default Gateway IP: _____

Netmask: _____

DNS Servers: _____