

REGISTRAR ACCREDITATION FORM

INFORMATION FOR APPLICANTS

1. All applicants must provide complete and accurate responses to the questions contained in Sections A, B and C of the application form. If there is no response available for a particular question, please indicate that fact next to the number corresponding to the question.
2. While submitting this application form, applicants must attach the following documents:
 - a) A profile of the applicant which shall contain Certified copies of its Certificate of Incorporation, and information of its technical competence to serve as an accredited Registrar;
 - b) Two copies of the Registrar Agreement, Initialled and signed by the Applicant and dated;
 - c) Fees may be paid through the registry portal for those with access or
 - d) Electronic Funds Transfer to:

**FIRST NATIONAL BANK
BRANCH: MAIN MALL
BRANCH CODE:282867
BANK ACCOUNT NUMBER: 62011115088
SWIFT CODE: FIRNBWGXXX**

3. All documents and payment should be sent by courier or dropped off directly to BOCRA at the following address:

**ATT: BW REGISTRY
BOTSWANA COMMUNICATION REGULATORY AUTHORITY
PLOT 50671 INDEPENDENCE AVENUE
PRIVATE BAG 00495
GABORONE BOTSWANA**

4. Applications sent via email and fax will not be accepted.
5. All queries and questions should be directed to registry@bocra.org.bw or info@bocra.org.bw
6. For all successful applications or renewals, a non-refundable accreditation fee of BWP3000.00 should be paid to the account stated in para 2. d).

SECTION A

GENERAL INFORMATION

1) COMPANY NAME

2) COMPANY REG NUMBER (ATTACH CERTIFICATE OF INCORPORATION)

3) PHYSICAL AND POSTAL ADDRESS

4) EMAIL

5) PHONE and FAX

SECTION B

TECHNICAL DETAILS

1) IANA NUMBER IF APPLICABLE

2) TECHNICAL CONTACT

3) TECHNICAL CONTACT EMAIL:

4) ADMINISTRATIVE CONTACT

5) ADMINISTRATIVE CONTACT EMAIL:

6) CUSTOMER SERVICE CONTACT

7) CUSTOMER SERVICE CONTACT EMAIL:

8) CONNECTION TO REGISTRY (PLEASE TICK) EPP GUI

9) PRIMARY FOCUS (PLEASE TICK) PUBLIC SERVICE BRAND PROTECION

10) EXPLAIN HOW YOU PLAN TO HANDLE CUSTOMER COMPLAINTS AND REQUESTS FOR CHANGES

11) DO YOU HAVE ANY AGREEMENTS WITH RESELLERS? PLEASE EXPLAIN

12) HOW DO YOU INTEND TO HANDLE CUSTOMER BILLING?

13) DO YOU HAVE ANY PREVIOUS EXPERIENCE IN THE DOMAIN NAME BUSINESS? PLEASE DESCRIBE YOUR CURRENT RESELLER OPERATIONS AND ANY OTHER SERVICE YOU PROVIDE.

SECTION C

CONFIRMATION AND UNDERTAKINGS

By signing this application form, you:

- a. confirm that all the information contained in this application form, and all supporting documents included with this application form, are true and accurate to the best of your knowledge;
- b. confirm that you have read and understood BOCRA's Registrar Agreement, and Published Policies;
- c. give BOCRA permission to perform a background search on you or your company;
- d. give BOCRA permission to contact third parties, investigate, request and obtain additional information and documentation, and otherwise verify the information contained in this application; and
- e. Indemnify BOCRA against any liability that may arise through its process of verifying the information provided in this application, and on the part of any third parties who provide truthful material, and relevant information about you as requested in this application form.

Full Name of Applicant

.....

Company Stamp or Representative Signature

Contact Person:

Name.....

Title

Date

Signature