

DYXnet Co-location Service Access Authorization Form

Information Contact	
Company Name:	_____
Contact Person:	_____ Title: _____
Contact Address:	_____ _____
Telephone:	_____ Fax: _____
Mobile/Pager:	_____ Email: _____

Change Request For Permanent Access Authorization				
(Please circle one)	Printed English Name on ID Card / Passport or name in Pinyin	ID Card / Passport No.	Authorization Level (Please circle one)	Remark
Add / Delete / Modify			1 / 2 / 3	
Add / Delete / Modify			1 / 2 / 3	
Add / Delete / Modify			1 / 2 / 3	
Add / Delete / Modify			1 / 2 / 3	
Add / Delete / Modify			1 / 2 / 3	

Notes: Authorization levels
 Level 1 - Have authority to enter the Data Center in person only
 Level 2 - Have authorization level 1 and can bring along any other people
 Level 3 - Have authorization level 2 and right to grant one-time access for any people with prior written notice

Please return the completed form to helpdesk@dyxnet.com or FAX it to (852) 3152 5024. Should you have enquiries please call our Customer Service Centre at (852) 3152 2626.

Customer Declaration	
<p>On behalf of _____, I approve that all people listed above are eligible to access all equipment which belongs to our company co-located in DYXnet's data center and it is agreed that DYXnet is not liable to any damages caused to our equipment due to the access to data centre by any of the people under the authorization given above.</p> <p>Accepted and confirmed by:</p> <p style="text-align: center;">_____</p> <p style="display: flex; justify-content: space-between;"> Authorized Signature with Company Chop Date(yyyy-mm-dd) </p>	

Official Use Only			
Customer ID: _____	Site ID: _____	Rack ID: _____	
Received By: _____	Date(yyyy-mm-dd): _____	Remark: _____	