

**Authorization Letter Format**

**(Should be submitted on the Department Letterhead)**

[*Name*]

[*Designation*]

Reference: - Domain Registration ID *xxxxxxxxxx* (*received via Website On-line Registration Form through E-mail*)

Dear Sir,

As [*Title*], the head for the [*Department Name*], I formally request that authority over the [*xxxxx.mp.gov.in*] forth-level domain name be delegated to the [*Department Name*]. By requesting this domain name, I acknowledge that we are eligible and meet all the GOV.IN domain requirements. In addition, I shall ensure the website content of the requested domain name conforms with the .GOV.IN policy and IT Act of India.

This domain name will be used only for official purpose.

[*Title, first name, last name*] will be the Administrative Point of Contact (POC) for [*xxxxx.mp.gov.in*]. If there are any queries, please contact [*him/her*] at [*phone number*] or via email at [*email address*].

Thank you for your kind cooperation.

Sincerely,

[*Signature*]

[*Name*]

[*Date*].

To,

The Principal Secretary  
Government of Madhya Pradesh  
Information Technology Department  
Mantralaya, Vallabh Bhawan, Bhopal [M.P]