PUBLIC INTERNET ACCESS SERVICE
PROVIDER COMPLIANCE
REPORTING FORM

This Document is Property of the
National Information Technology Development Agency (NITDA)

NITDA/PIASP-02/COMPLIANCE

This form is issued pursuant to Article 4.0 of the Public Internet Access
Regulation of NITDA 2019

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PUBLIC INTERNET ACCESS PROVIDER INFORMATION

PART A

ORGANISATION

Name: _____________________________________________________________

Website Address: ________________________________________________

Telephone Number(S): ____________________________________________

Corporate Headquarters Address: ______________________________________

Postal Address: ________________________________________________

____________________________________________________________________

PRIMARY CONTACT PERSON

Name: _____________________________________________________________

Mobile Number(S): ________________________________________________

E-Mail Address: ________________________________________________
PART B

USER REGISTRATION, LOGIN AND ACCESS REQUIREMENTS

<table>
<thead>
<tr>
<th>Login Portal (URL)</th>
<th>Current Number of subscribers/users</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

Please, attach evidence that shows current number of subscribers/users, Acceptable Use Policy (AUP), Fair Use Policy (FUP) and other access terms and conditions.

PART C

INTERNET ACCESS PROTECTION (within the preceding six months)

Please attach evidence of packet filtering, secure communication/encryption, Intrusion detection/prevention mechanism etc.
PART D
QUALITY OF SERVICE AND CONNECTION HISTORY PER LOCATION (within the preceding six months)

<table>
<thead>
<tr>
<th>S/N</th>
<th>Location</th>
<th>Total Number of Connections in the last six months</th>
<th>Average Committed Information Rate/Speed Per User</th>
<th>Number of Internet Access Attempt Failure</th>
<th>Number of successful connections</th>
</tr>
</thead>
<tbody>
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</table>

Please attach evidence

PART E
EVIDENCE OF SERVICE/DATA HOSTING LOCATION (within the preceding six months)

Please attach evidence
PART F
REPORT OF INCIDENCE AND/OR VIOLATION OF ACCEPTABLE USE POLICY AND OTHER TERMS AND CONDITIONS (within the preceding six months)

<table>
<thead>
<tr>
<th>S/N</th>
<th>Type Incidence Reported</th>
<th>Action Taken</th>
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<tbody>
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<table>
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<tr>
<th>S/N</th>
<th>Type of Violation Reported</th>
<th>Action Taken</th>
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</thead>
<tbody>
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</table>

Please fill as many tables as necessary.

NOTE: This form shall be filled twice a year (before 31st January and 30th June yearly)

UNDERTAKING:

We _____________________________________________ hereby certify that the information supplied in this compliance form is true in all respects and gives an undertaking that we shall continue abide by the terms and conditions upon which the registration is granted. We accept that our registration maybe revoked, and the appropriate penalty applied if it is established that we have supplied misleading or incorrect information.

____________________________   ___________________
Name/Signature                      Date