National Informatics Centre
(Videoconferencing Technologies and Services Division)
Webcast Services
Request for Live Streaming /Video on-demand/ Webcast

Level of the Webcast	POI / VP / PM/ Parliament /CJI/Governor/Union Min./ Chief Minister/ State Min./Secretary/ Assembly /NIC/Other etc.
Organizing Ministry	
Organizing Department	
Group Division/State Unit (In case NIC coordinating it)	
Ministry/Department Contact Person's Details	a) Name b) Address c) Email d) Telephone/Mobile
NIC Webcast Coordinator detail	a) Name b) Email c) Telephone/Mobile
Event Accessibility/Availability	Internet/ NICNET
Event Name /Description/ Title	English
	Hindi
Date and Timings of Event	Date: Time: No of sessions:
How are you planning to get live audio/video feed to Webcast Control Room?	Through VC(VC ID)/ Own Live encoding/ Through Hired Agency/ DD Live Channel Name/ By any other means
Internet / Leased line details (Name of ISP, bandwidth) details- **Minimum 2 Mbps** required	
Hired Agency / Event (Video Coverage) Management company details along with contact person (**If any**)	Name of Agency : Name of Contact person : Mobile Number:

For Video on Demand service also provide following information:

Ministry/Department Contact Person's Details	
Details of video clips (Title, size in GB, Sequence of clips)	
Required Media Format	MP4 / F4V with H264 encoding only
VoD Accessibility/Availability	Internet/ NICNET
Payment details (If Applicable)	
Any other details or remarks	

*In case of recorded on-demand service video clip should be in streaming format.

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Stamp & Signature of NIC Coordinator   **Stamp & Signature of Ministry Official**

NOTE: NIC shall host the VoD/Live webcast recordings for 3 Months and thereafter will be removed or handed over to the owner / Ministry /Department on request. After 3 Months NIC shall not be responsible for recorded videos.

National Informatics Centre Services Incorporated
A Government of India Enterprises under NIC
Ministry of Electronics and Information Technology
New Delhi

PROFORMA – INVOICE REQUEST FORM

DETAILS OF USER DEPARTMENT

Date: /   /

1	Ministry Name	
2	Department Name	
3	Alias	
4	URL of the organizing department/ Ministry	
5	Complete Postal Address	
6	Telephone / Mobile Number	
7	Email id	
8	GSTIN Number *	
9	Whether Central Govt/ State Govt/ Central – PSU / State – PSU/ Autonomous Body/ Institutions/ Others	
10	Contact Person	a) Name b) Designation c) Email id d) Telephone/Mobile
11	Project Name & Number	
12	PAC / PRISM ID	18292
13	NIC / NICSI Coordinator (Name, Email id, Telephone / Mobile Number)	a) Name b) Designation c) Email id d) Telephone/Mobile
14	Additional Details	
15	Event Name	
16	Event Date & Time	
17	Conference schedule /Program details with no. of days	

*In case GSTIN Number is not available, please make a declaration as "Not Available". Input Tax Credit will not available in such cases.

Name:
Designation:
………………………….   Mobile:
(Signature with Stamp of user/requester)