



FTP Account Request

Request Date: _____

Requestor: _____

Institution Name: _____

Address: _____

Country: _____

Phone Number: _____

Email Address: _____

Public IP Address/IP Range: _____

As part of the SFTP Configuration, we require the [Public IP Address](#) of any system connecting to our sFTP server. This is necessary in order to keep the connection secure. This can also be a range of IP Addresses.

Note: To determine your Public IP Address, click [here](#) or a simple web search for "What is my IP?" should return your public IP Address. The format of an IP address is 4 sets of 1-to-3 digit numbers, separated by periods. For example, 174.67.1.241 is an IP address.

Technical FTP Contact (if different from above): _____

RT Facility (if different from above): _____

Phone Number: _____

Email Address: _____

IROC Houston RTF #: _____

Treatment Planning System and Version: _____

Submit form to: IROC Rhode Island Fax: (401) 753-7601

For questions, please contact ISDA@QARC.org Phone: (401) 753-7600

Submit

IROC Rhode Island Use Only:

Site Code: _____ **Account Set Up Date:** _____

Username: _____ **Password:** _____

Comments: