

# Domain Termination/Deletion form

## 1. CURRENT DOMAIN REGISTRANT/HOLDER (please specify details as listed in corresponding Whois record)

Company name:

First name, last name:

Street and house number:

City and postal code:

Phone:

Fax:

E-mail:

## 2. DOMAIN NAMES FOR DELETION

## 3. CHOOSE TYPE OF DELETION

I confirm that I am the Owner of the listed domain(s) and I agree to the termination/deletion of the domain(s). Please execute the deletion

- upon the end of the current registration period (Delete on Expire).
- immediately.

City, Date

valid signature, company stamp

**Please complete and execute this form and return it  
via fax to +49 228 32 968 49!**