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Registration Form for Digital Certificate

GOVERNMENT



Customer Identification Number : (for office use only)

PLEASE TICK ANY ONE

Class2



Class3



Validity 2 Years



Validity 1 Year

Only Signing



Sign & Encrypt

INSTRUCTIONS:

- Please fill the form in English only in legible format and IN BLUE INK ONLY.
- 2. OID would be as per our CPS. Please refer to our CPS at www.ncodesolutions.com/cps.pdf for more information.
- 3. Incase of keypair been compromised/lost/deleted, please apply for revocation of certificate.
- 4. For obtaining Class 3 "Video recording of DSC applicant" is mandatory as per CCA - Guidelines.
- Incomplete application is liable for Rejection. The rejected form would be physically discarded after 15 days from the date of rejection. No request would be entertained with respect to rejected form after the rejection period.
- 6. All supporting documents should be attested by Gazetted Officer or Bank Manager or Post Master and the Name, designation, office address and contact number of the attesting officer should be clearly visible.
- 7. FIPS 140-1/2 level validated Hardware cryptographic token required to download the DSC.

Applicant Name	APPLICANT TO SIGN ACROSS THE PHOTOGRAPH EXTENDED TO APPLICATION FORM Affix recent							
Surname		First Name	Middlenam	e	passport size			
Unique Email ID			photograph of the					
Unique Mobile No.					applicant			
Identity Details of Applicant DOC No.								
*PAN Driving Passport Govt. Postoffice Copy of Bank Account Passbook containing photo & signed by ID Card ID Card applicant with attestation by concerned Bank Officer Tick any one and enclose the attested copy of same. (*For PAN based DSC, please provide the PAN Card details.)								
Organization Name								
Govt. ID Card Detail (Enclose attested copy)				Department				
Office Address	As per supportting document submitted							
Area / Landmark		Tov	wn/City/District	State	PINCODE			

PLEASE NOTE:

"Section 71 of IT Act stipulates that if anyone makes a misrepresentation or suppresses any material fact from the CCA or CA for obtaining any DSC such person shall be punishable with imprisonment up to 2 years or with fine up to one lakh rupees or with both.

DECLARATION:

- 1. In case of submission of Aadhaar Card Details, I provide my consent to (n)Code Solutions for using Aadhaar Card details for my identity authentication only.
- 2. I hereby agree that I have read and understood (n)Code Solutions CPS and the subscriber agreement and promise to abide the same. I have read and understood guidelines for storage of private keys mentioned in (n)Code Solutions CPS.
- I hereby authorise (n)Code Solutions to conduct mobile verification as per CCA guidelines, on the number mentioned above.

Date .	Place :	Signature of Applicant with seal of Organization (Blue Ink Only)
Varieta d bu (n) Cada O		For DA was only
Verified by (n)Code O	rtice	For RA use only All Documents, address and physical presence verified by

Seal & Signature

Toll Free: 1800 - 233 - 1010

RA Name, Seal & Signature

www.ncodesolutions.com







Registration Form for Digital Certificate

GOVERNMENT



Customer Identification Number : (for office use only)



Documents Required for Verification

		nonto required for							
Attested copy of following for Government Application									
A. Applicant's ident	tity card.								
B. The application Office / NIC Coo		Certified by the authorized s	ignatory (Competent	authority of the Department/ Head of					
C. Copy of identity	card of authorised signatory.								
Note:									
A. For Class 3 cert of pensioners	ificate, HOD should certify the	physical verification of subscr	iber. with a statemer	nt similar to that used for life certificate					
B. The attestation	of documents may be carried o	out by Head of the Office/Gaz	etted Officer.						
PAYMENT DETA	ILS								
Date :	Bank Name :	DD / Ch	eque No. :	Amount :					
		Authorization Le	tter						
	ns (A Division of GNFC L	td.)							
This to certify that Mr. / Ms.				(certificate applicant					
Mobile			ne application form f	or issue of Digital Certificate to the bes					
of my knowledge and belief and is working with (organization name). I certify the physical verification of the applicant. He / She is hereby authorized to obtain a Digital Certificate issued by (n)Code Solutions.									
DETAILS OF AUTHORISING PERSON									
Name									
Designation		Identity							
Date				ising Person (Blue Ink Only) I of Organization)					
Place		[Sign :	(WILLI SEA	1					

(n)Code Offices

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Surat

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Toll Free: 1800 - 233 - 1010



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