

PLEASE TIC

INSTRUCTIONS

## Registration Form for Digital Certificate





**ORGANIZATION** 

Customer Identification Number :			(for office use only)	e-Safe . e-Secure . e-Su
LEASE TICK ANY ONE	Class2	OR Class3		
Validity 2 Years	OR Validity 1	Year Only Sig	gning OR Sign & Encrypt	<b>=</b> *

1. Please fill the form in English only in legible format and preferably IN BLUE INK.

2. For obtaining Class 3 "In Person verification and video recording of DSC applicant " is mandatory as per CCA - Guidelines.

3. As a Pre-requisite once the form is processed, Please send SMS as below to any one of these no. 7226971020 / 9913597849 / 8000281227 / 7046466623. [Customer id :Space[CID NO.]Space[Email:] Space[

 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.

- 5. 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. OID would be as per our CPS. Please refer to our CPS at www.ncodesolutions. com/cps.pdf for more information.
- Incase of keypair been compromised/lost/deleted, please apply for revocation of certificate.
- 8. FIPS 140-1/2 level validated Hardware cryptographic token required to download the DSC.

Applicant Name	APPLICANT TO SIGN ACROSS THE I	PHOTOGRAPH EXTENDED TO APPLICATION FORM		
Surname	First Name	Middlename	Affix recent passport size	
Unique Email ID				
Unique Mobile No.			applicant	
GST Number				
IMPUTITY LIGITIES OF APPLICANT	lease tick any one and nclose the copy of same			
*PAN Driving License Driving License Drovide the PAN Card details and enclose the attested copy of same.  Copy of Bank A/c. Passbook containing photo & signed by applicant with attestation by concerned Bank Officer  Government issued photo ID card bearing the signature of the applicant signature of the applicant				
Company Name				
Company PAN		Department		
Office Address As per	As per supportting document submitted			
Area / Landmark	Town/Cit	ty/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
Verified by (n)Co	ode Office	For RA use only ALL DOCUMENTS, ADDRESS AND PHYSICALPRESENCE VERIFIED BY
Seal & Signature		RA Name, Seal & Signature

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Toll Free: 1800-233-1010 www.ncodesolutions.com



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**ORGANIZATION** 









**Documents Required for Verification** 



DOCUMENT REQUIRED FOR AN ORGANIZATIO	ON DSC APPLICATION
1 ATTESTED COPY OF FOLLOWING DOCUMENTS	
INDIVIDUAL/ PROPRIETORSHIP FIRM	
Copy of Business Registration Certificate" (S&E / VAT / ST) Copy of statement of (First and second p	
PARTNERSHIP FIRM	
Copy of partnership deed (Max of first three pages including list of partners and authorised signatories)	Copy of PAN card (Front side page-1)  Copy of statement of bank account (First and second page)
Copy of ITR accompanied by computation of income/finan	cial statement pertaining to last financial year (First and second page)
CORPORATE ENTITIES	
	py of article and memorandum Copy of statement of bank association (First two page) account (First and second page)
	he authorized representatives for forwarding / certifying the application orm for DSC should be duly authorized by the resolution of board of directors
LIMITED LIABILITY PARTNERSHIP	
PAN Card of Incorporation and Registration Certification LLP issued by authority such as Registrar	ate Copy of LLP Memorandum of Association/ copy of rules/Bye laws
	Resolution for Authorization to Authorized Signatories for DSC / forwarding/ attestation of organizational documents
Certified copy of organizational ID proof of authorized sign	atory
NON-GOVERNMENT ORGANISATION / TRUST	
PAN Card of Incorporation and Registration Certification NGO/Trust issued by authority such as Registrar /	
Copy of Bank Statement Copy of Income Tax verified/attested by Banker Return of last year	Authority/Resolution for Authorization to Authorized Signatories for DSC application/ forwarding/ attestation of organizational documents
Certified copy of organizational ID proof of authorised sign	atory
2 Authorization Letter	
COPY OF SUPPORTING DOCUMENTS SHOULD BE ATTE	ESTED BY ANY ONE OF THE FOLLOWING
(THE SEAL AND SIGN OF THE ATTESTING OFFICER SH	
Gazette officer Bank Manager/Authorised executive of	personal documents of applicant)
*Please enclose of the Certified copy of organizational ID proof of au	thorized signatory
PAYMENT DETAILS	
Date : Bank Name :	DD / Cheque No. : Amount :
(n)Code Offices Corporate Office Ahmedabad : 079-	4000 7300 • dscsales@ncode.in
Delhi Bangalore	Mumbai Surat
011-26452279/80 080-25206622	022-22048908 0261-2789944
northsales@ncode.in southsales@ncode.in	mumbaisales@ncode.in suratsales@ncode.in
	Toll Free: 1800-233-1010

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**ORGANIZATION** 







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	Authorizat	ion Letter	
Please Note: The authorized signat	ories for applying Digital Signatur	re Certificate should be d	uly authorized by the resolution of board of
directors / Partners.	.,, 0		
То,			
(n)Code Solutions (A Divisio	n of GNFC Ltd.)		
This to certifiy that			
Mr. / Ms			(certificate applicant)
Mobile	has provided correct inform	ation in the application fo	orm for issue of Digital Certificate to the best
of my knowledge and belief and is	working with		(organization name). He / She is
hereby authorized to obtain a Digit	al Certificate issued by (n)Code S	olutions.	
	DETAILS OF AUTH	IORISING PERSON	
Name			
Designation		Identity	
Date	/ /2017	Signature of A	uthorising Person (Blue Ink Only)

### NOTE:

Place

In the case of authorised signatories' self DSC application, It should be counter signed by at least one authorised personal other than authorised signatory.

[Sign:

### **END OF FORM**

(n)Code Offices

Corporate Office Ahmedabad: 079-4000 7300 • dscsales@ncode.in

Delhi

011-26452279/80 northsales@ncode.in Bangalore

080-25206622 southsales@ncode.in Mumbai

022-22048908

mumbaisales@ncode.in

Surat

(with seal of Organization)

0261-2789944 suratsales@ncode.in











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