

Registration Form for Digital Certificate [Government]

Customer Identification Number _____ (For office Use Only)



Instructions

1. Please fill the form in BLOCK LETTERS in English only.
2. This form is divided into two parts Form A & Form B.
3. Form A contains details of certificate applicant and needs to be filled up each time.
4. Form B contains organizational details and needs to be filled up only once for an Enterprise / Organization.
5. (n)Pro refers Class3 Government and will bear Object Identification as 2.16.356.100.2.3
8. Separate DSC for Signing & Encryption will be issued.

Affix recent passport size photograph of the applicant

Applicant to sign across the photograph extended to application form

FORM A

Validity

1 Year

2 Year

(Only SHA-256)

Name of the Applicant (As required in the Digital Signature Certificate)

Please ensure that the name as it appears in the identity proof matches with the name mentioned below

Surname First Name Initials

Organization Name

Office Address

Town/City/District

State/Union Territory

PIN Department

Contact Number STD Code PH Fax

Mobile No.

Date of Birth

E-mail Address

Identity Details Number

(Please tick and fill ANY ONE)

Post Office ID Card // Driving License // PAN // Voter's ID // Bank Account Passbook No // Govt ID Card //

Registration Form for Digital Certificate [Government]

Customer Identification Number _____ (For office Use Only)



FORM B

Organization Details to be filled up only once for an organization

(Please ignore if already submitted)

Name of the Govt.Orgn / Agency / Dept

Administrative Ministry Dept

Under State / Central Dept

Address

Town/City/District

State/Union Territory

PIN

Contact Number

(STD Code)

(Phone Number)

(Fax Number)

E-mail

Contact Person

I hereby agree that I have read and understood (n)Code Solutions CA CPS and the Subscriber Agreement and promise to abide by the same. I also acknowledge that I shall be using USB Crypto Tokens to store my private key as prescribed in guidelines for storage of private keys provided by Controller of Certifying Authorities.I acknowledge that information provided in Form A & Form B are Correct to my knowledge.

Date :

Place :

Signature of Applicant

[Name:]

Cheque / D.D. to be Drawn in favour of "(n)Code Solutions, A Division of GNFC Ltd."

Cheque should be " Payable at Par "

Payment Details

DD / Cheque Number _____

Date _____ Amount _____

Bank Name _____

LRA Details

All Documents Checked & Verified by

LRA Name / Stamp / Signature

Registration Form for Digital Certificate [Government]

Customer Identification Number _____ (For office Use Only)



Documents Required for Verification

Documents Required for each Digital Certificate Application :

- Authorization Letter in favour of the certificate applicant from the applicant organization (as per the format attached herewith, on the Companys Letterhead Only)
- Latest photograph of the applicant

Certified copy any one of : (Please tick the one submitted)

- ID Card having Employee Identification No
- Pan Card
- Driving License
- Voter's ID
- Post Office ID Card
- Copy of Bank Account Passbook with attested Photograph by the Bank

Note :

- Applicants are required to present themselves at the LRA location where the registration form for Digital Certificate was sent,for verification of physical presence.
- Please refer to the CPS for more information.
- In case you require any assistance, please get in touch with us at support@ncodesolutions.com or dial TollFree : 1800 – 233 - 1010

Registration Form for Digital Certificate [Government]

Customer Identification Number: _____ (For office Use Only)



Authorization Letter

(This Authorization Letter is required on the Organization's letterhead)

To,
 (n) Code Solutions,
 A Division of Gujarat Narmada Valley Fertilizers Company Limited.

This is to certify that
 Mr. / Ms. _____ (certificate applicant)
 has provided correct information in the application form 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 Class 3 Digital Certificate issued by (n)Code Solutions .

Details of Authorized Signatory

Name	<input type="text"/>	
Designation	<input type="text"/>	
Organization Name	<input type="text"/>	
Signature of Authorized Person (with stamp of Organization Office)	<input type="text"/>	
Date	<input type="text"/>	Place <input type="text"/>

(n) Care

Ahmedabad Corporate Office	Mumbai	Delhi	Bangalore	Chandigarh	marketing@ncodesolutions.com
079-4000 7300	022-22048908	011-26452279	080-25272525	0172-2707732	



e - S a f e , e - S e c u r e , e - S u r e