PRINT DOWNLOAD

CERTIFYING AUTHORITY Recognized by the controller of Certifying Authorities

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INSTRUCTIONS size				Affix recent passport- size photograph of the			
USER TYPE – GOVERNMENT /	BANKING S	ECTOR					applicant. Applicant to
							sign across the
Validity of DSC*				Gender*	Male	Female	photograph
Empower India DSC		1 year					
2 Years							
Surname^				Given Name*^			
Father/Husband's Name				Initials^			
E-Mail Address*^							
Alternative E-Mail Address							
Organisation details							
Name*^							
House Identifier*^							
Street Address*^							
City*^				Pin Code*^			
Country*^		-	1	State*^			

Telephone*		Mobile	
FAX			
Administrative ministry / Depa	irtment*		
Government of India / State Government*			

DOCUMENT CHECKLIST FOR GOVERNMENT TYPE OF CERTIFICATE

Subscriber proof of identity and residence(ATTESTED copy required)

Identity and Residence						
Passport			Driving License			
Identity						
PAN Card			Passport			
Driving License			Bank A/C Passbook with Photo			
Photo Identity Card						
Residence						
Latest Telephone Bill			Latest Electricity Bill			
Latest Bank Statement			Passport			
Driving License						
Letter of Authority*	Letter of Authority					



Annexure A - Letter of Authority

I,	ir	n the capacity of the		of	
authorize		, whose signatur	e is attested below t	o carry out all the	necessary formalities on
behalf of		for the application	of a Class-3/Class-2	2 Digital Signature	Certificate with the validity
period of	year(s).(required valid	dity period needs to be	mentioned)		-

Signature and Designation of Authorizing Person

Signature and Designation of the Applicant

ľ	Applicant Declaration		RA Declaration	
I hereby confirm that I have read and understood the above instructions and will follow the above instructions for obtaining and using the Digital Signature Certificate.		d will I hereby confirm the subscriber.		
I	Date:	Date:		
	Place: Signature of the Applie	cant Place:	Signature of the RA Officer	

RA OFFICE NAME : ______ / USER ID : _____ / REQUEST NUMBER : _____

The certificate Request Form, Online Enrollment Form, Demand Draft and the supporting documents as per the document checklist have to be forwarded to the following address:

Duly mark the envelope as 'APPLICATION FOR DIGITAL CERTIFICATE'

RA Office

TCS-CA Certificate

Letter of Authority

I,	, in the capacity of the
	of
authorize	whose signature is attested below to carry out all the
necessary formalities on behalf of	for the
application of a CLASS2 Digital Signa	ture Certificate with the validity period of one year.

Signature and Designation of Authorizing Person With Stamp

Signature and Designation of the Subscriber With Stamp

Signature and Designation of the Authorizing Person With Stamp

Instruction for filling the form: (Form Containing 3 Pages)

Page No.1

- 1. Affix photographs & Sign across the photographs.
- 2. Fill up the details.
- 3. Tick on the appropriate check box \square & radio button \bigcirc

Page No. 2

- 1. Sign & seal on (Signature & Designation of the Applicant)
- 2. Sign & seal on (Signature of the Applicant)

Page No. 3

1. Sign & seal on (Signature & Designation of the Subscriber with Stamp)

Enclosure:

(Please attach following two documents with the form & both should be self attested)

- 1. Photo Copy of the Pan Card (Compulsory)
- 2. Photo copy Driving License/Bank Passbook/Passport (any one is Compulsory)

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