

APPLICATION FORM - SIGNATURE / ENCRYPTION CERTIFICATE



FOR ORGANISATION

 Application ID: Signature Encryption (For Office Use Only)

PLEASE FILL IN BLOCK LETTERS ONLY. ALL FIELDS ARE MANDATORY

 More Instructions available at: <http://www.e-mudhra.com/instruction.html>

APPLICANT INFORMATION

LAST NAME										FIRST NAME										MIDDLE NAME									
<input type="text"/>																													
Date of Birth <input type="text"/>										Gender <input type="checkbox"/> Male <input type="checkbox"/> Female										Nationality <input type="text"/>									
Organisation Name <input type="text"/>																													
Department <input type="text"/>																													
Address <input type="text"/>																													
<input type="text"/>																													
<input type="text"/>																													
City <input type="text"/>															Pin code <input type="text"/>														
State <input type="text"/>																													
PAN of Applicant <input type="text"/>															Mobile <input type="text"/>														
Email ID <input type="text"/>																													

 Affix recent passport size photograph of the applicant **duly signed across**

CLASS:

☐ Class 1 ☐ Class 2 ☐ Class 3

TYPE:

☐ Signature ☐ Encryption ☐ Combo

VALIDITY:

☐ 1 Year ☐ 2 Years

DOCUMENT PROOF (attested by Bank Manager OR Post Master OR Gazetted Officer (Group 'A' /Group 'B'), against producing the originals)

Proof of Identity (Any one of below)*

(Having applicant photo and Signature, as part of it)

- ☐ Passport.
☐ PAN Card of applicant (Mandatory if PAN provided).
☐ Driving License.
☐ Post Office ID card.
☐ Photo ID card issued by the Ministry of Home Affairs of Centre/State Governments.
☐ Any Government issued photo ID card bearing the signatures of the individual.
☐ Bank Account Passbook containing the photograph and signed by an individual with attestation by the concerned Bank official.

 ID Number

Attesting Officer *

☒ Self attested copy of ID Card/Contact details of attesting officer.

Organisation Type (Any one of below)*

☐ Company ☐ Partnership ☐ Proprietorship ☐ Others

Proof of Organisation (All are Mandatory)* - Can also be attested by Authorized Signatory

Document Name	Company	Partnership	Proprietorship	Others
List of Directors with seal and signature.	✓			
List of Partners with seal and signature.		✓		
Attested copy of Organizational PAN Card.	✓	✓		✓
Attested copy of Bank Statement (First 2 pages).	✓	✓	✓	✓
Attested copy of Incorporation Certificate.	✓			
Attested copy of Article and Memorandum of Association/Rules/By Laws (First 2 pages).	✓			✓
Attested copy of Last Audit Report and annual return (First 2 pages).	✓			
Attested copy of Partnership Deed/Trust Deed /LLP Agreement(First 2 pages).		✓		✓
Attested copy of last ITR (First 2 pages).		✓	✓	✓
Attested copy of Business Registration certificate.			✓	
Certified copy of Authorized signatory organisation ID Proof.	✓	✓	✓	✓

DECLARATION BY APPLICANT

I hereby agree that I have read and understood the provisions of e-Mudhra Certification Practice Statement (CPS) and the subscriber agreement and will abide by the same. The information provided in this form is true & correct to the best of my knowledge. I accept publishing my certificate information in e-Mudhra repository. I am aware of risks associated in case of Class 1 Certificate, when storing the private key on a device other than a FIPS 140-1/2 validated cryptographic module.

 Date

 Place

 Signature of the applicant
(As in ID proof | Blue Ink Only)

AUTHORIZATION

I hereby authorize the above applicant, on behalf of our Organisation to apply for obtaining the Digital Signature/ Encryption Certificate issued by e-Mudhra

Authorized Signatory (Sign and Seal)

TO BE FILLED BY RA OFFICE ONLY

I declare that the applicant has provided correct information in this application form. I have checked and verified the application form and supporting documents. I hereby take full responsibility for any wrong verification made, or wrong documents submitted for the application.

 Date

RA Name, Code & Seal

Signature of RA