

## Registration Form for Class 3 Digital Certificate



Customer Identification Number : \_\_\_\_\_ (for office use only)

**Validity** 1 Year  2 Year  **Type** Only Signing  Sign & Encrypt

Affix recent passport size photograph of the applicant

**Applicant Name**  
 Surname First Name Middlename

**Email ID** **Date of Birth**  
 DD MM YY YY

Applicant to sign across the photograph extended to application form

**Company Name**

**Office Address**   
 (As mentioned in attached supporting)

**Town/City/District**  **State/Union Territory**

**PIN**  **Contact No.** PH  MO

**Identity Detail of Applicant** Please tick any one and enclose the copy of same

\*PAN Card  Postoffice ID Card  Driving License  Passport  Govt. ID Card  Copy of Bank Account Passbook containing photo & signed by applicant with attestation by concerned Bank Officer

\*For PAN based DSC, pls provide the PAN Card details and enclose the copy of same.

**Company PAN**  **Department**

I hereby agree that I have read and understood (n)Code Solutions CA 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 and risk involved by using other storage devices to store private keys. I shall be held responsible for all risks arising out of not using USB Crypto Tokens to store private key.

### INSTRUCTIONS :

- Please fill the form in English only in legible format.
- The details are required to obtain Class 3 Organization Certificate and will bear Object Identification as 2.16.356.100.2.3
- In case of keypair been compromised/lost/deleted, please apply for revocation of certificate.
- Incomplete application is liable for Rejection.
- For obtaining Class 3 "In Person verification" is mandatory as per CCA - Guidelines.
- Please refer to the CPS for more information.
- All supporting documents should be attested by Gazetted Officer or Bank Manger or Post Master. Alternatively the applicant can present originals to LRA for verification and attestation.
- In case of any assistance Please get in touch with us at : dscsupport@ncode.in or call : 1800 - 233 - 1010.

**Date :**

**Place :**

**Signature of Applicant with seal of Organization**

**Verified by (n)Code Office**

**Seal & Signature**

**For LRA use only**

All Documents, address and physical presence verified by

**LRA Name, Seal & Signature**

e - Safe , e - Secure , e - Sure



## Registration Form for Class 3 Digital Certificate



Customer Identification Number : \_\_\_\_\_ (for office use only)

### Documents Required for Verification

#### Document Required only once for an Organization / Enterprise :

##### 1 Attested copy of any one

- |  |    |   |    |  |    |   |
|--|----|---|----|--|----|---|
| <input type="checkbox"/> Valid business license document issued by State / Central Govt. | OR | <input type="checkbox"/> Memorandum and Articles of Association | OR | <input type="checkbox"/> Registered Partnership Deed | OR | <input type="checkbox"/> Certificate of Incorporation     |
|  | OR | <input type="checkbox"/> Annual Report                          | OR | <input type="checkbox"/> Latest Income Tax Return    | OR | <input type="checkbox"/> Bank details of the organization |

#### Document Required for each Digital Certificate Application :

- ##### 2
- |   |   |
|---|---|
| <input type="checkbox"/> Attested Copy of Company PAN | <input type="checkbox"/> Latest Photograph of the applicant |
|---|---|

#### Payment Details (Applicable for applicant obtaining DSC from any of (n)Code Offices)

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

Date : \_\_\_\_\_ Bank Name : \_\_\_\_\_ DD / Cheque No. : \_\_\_\_\_ Amount : \_\_\_\_\_

### Authorization Letter

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

This 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 CA.

Name :	<input type="text"/>		
Designation :	<input type="text"/>	Organization Name :	<input type="text"/>
Date :	<input type="text"/>		
Place :	<input type="text"/>		
		Signature of Authorized Person (with seal of Organization)	
		[Sign : _____ ]	

#### (n)Code Offices

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

Mumbai  
022-22048908  
mumbaisales@ncode.in

Delhi  
011-26452279/80  
northsales@ncode.in

Bangalore  
080-25272525  
southsales@ncode.in

Chandigarh  
0172-2707732  
punjabsales@ncode.in

Surat  
0261-3003690  
suratsales@ncode.in