



GNFC Customer Identification Num	ber:	e-Safe . e-Secure . e-Sure .				
1. The Form is divided into 2 2. Form A contains details of Form B contains organizate Enterprise/ Organization. 3. Please fill the form in BLO	Affix recent passport size photograph of the Applicant					
	FORM A					
1. TYPE OF DIGITAL CERTIFICA	ATE					
1.Class IIId						
2. CERTIFICATE VALIDITY	1 Yr. 2Yrs.					
	As required in the DIGITAL CERTIFICATE) appears in the Identity Proof matches with the name mentioned I	below)				
4. OFFICE ADDRESS						
Town / City / District						
State / Union Territory						
Pin						
Contact No.	(STD Code) Phone No Fax	No				
Mobile Phone No.	(STD Code) Phone No Fax	NO				
5. <u>DATE OF BIRTH</u> eg.	DATE MONTH YEAR 20 OCT 1970					
6. <u>E-MAIL ADDRESS</u>						
7. IDENTITY DETAILS (Please tick and fill ANY ONE)	Passport / Voter's ID / PAN / Driving Lic. / Ration Ca	ard No. / PF Ac.				





Customer Identification Number	r:				
8. <u>DEVICE DETAILS</u> Device Name:					
Device Serial No.:					
Physical Location: (Where device is hosted)					
Services offered by the Device:					
DETAILS RE	QUIRED	IF APPL	ICANT IS A	FOREIGN NATIONA	AL
9. <u>DETAILS</u>					
Nationality					
Passport No.					
Visa Details					





Customer Identification Number:																								
FORM B																								
10. ORGANIZATIONAL DETAILS TO BE FILLED UP ONLY ONCE FOR AN ORGANIZATION																								
(Please disregard if already submitted)																								
Corporate / Head / Register	ed Off	ce /	۱dd	lres	s:	_				_	_				_						_	_	 	,
		Щ													<u>L</u>					L		L	<u>L</u>]
]
Town / City / District]
State / Union Territory]
Pin																								
Contact No.		П			Γ	Τ				Τ			1		Π			Π			Π]		
	(ST	D C	ode	;)			F	ho	ne	No			_				Fa	x N	lo			,		
Corporate Web site (URL)]
Income Tax PAN No.																								
Bank Details :																								_
Bank Name																					L			
Bank Account No.]
I hereby agree that I have read and understood the provisions of the (n)Code Solutions CA CPS and the Subscriber Agreement and promise to abide by the same. For CLASS III: 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 mentioned in (n)Code Solutions CA CPS.																								
												Si	gn	atu	re	Of	Αр	pli	caı	nt				
Place :	_								١	[Na	me	e:]	
Registration form for Digital Signature Certificate along with verification documents can be sent to any one of the nearest LRA locations given on <i>(n)Code Solutions CA</i> website.																								
Duly mark the envelop as "App Website : www.ncodesolu E-Mail : support@ncode Help line : 91-79-26857315	tions.	com			al C	ert	tific	ate	<u>".</u>															





Customer Identification Number: _____

DOCUMENTS REQUIRED FOR VERIFICATION

Documents Required and Submitted by the Applicant								
Class IIId								
Documents required only once for an Organization / Enterprise for a Class IIId Certificate:								
Certified true copy (from Company Secretary / a Director / Partner of the Organization) of any one: (Please tick the one submitted)								
☐ Certificate of Incorporation / ☐ Memorandum and Articles of Association / ☐ Registered Partnership Deed / ☐ Valid business license document								
Certified true copy of any one: (Please tick the one submitted) ☐ Annual Report / ☐ Income Tax Return / ☐ Statement of Income / ☐ Bank details of the organization								
Documents required with each Digital Certificate Application :								
☐ Authorization Letter in favour of the certificate applicant from the applicant organization (as per the format attached herewith)								
☐ Latest photograph of the applicant								
□ Device Ownership Proof								
PHYSICAL PRESENCE IS REQUIRED FOR CLASS IIId CERTIFICATE APPLICANT								

Note:

- Applicants for Class IIId certificates shall 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.





Customer Identification Number: _____

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	he Application Form for issue of Digital Certifica	ate to the best of my
knowledge and belief and is working w	vith	
(organization name). He / She is he	ereby authorized to obtain a Class IIId Digital	Certificate issued by
(n)Code Solutions CA.		
Details of Authorized Signatory: Name	:	_
Designation	÷	-
Organization Name	÷	_
Signature (with stamp of Orgn. / Office)	:	_
Date	:	_
Place	:	_