

# **Digital Signature Certificate Subscription Form**

Class 2	Individual	Signing	1 Year						
Class of Certificate Class 3	With Org Name Enc	ryption	2 Years Req	uest ld:					
Section 1: Subscriber Details									
Name*:									
Name .									
Designation :					* 0 - 15 A 11 - 1 - 1 Db - 1 -				
Date of Birth*:	M M Y Y Y	Gender *:	Male	Female	* Self Attested Photo				
Address (Residential address in car	se of Individual or Organization address	s in case of DSC	with ORG )						
Organisation Name * (Mandatory in case of ORG DSC)									
(Mandatory in case of ONG DOC)					<b>N</b>				
Door No/Building Name *	:								
Road/ Street/ Post Office *					<ul> <li>Use blue-ink only including signature.</li> </ul>				
Town/ City/ District *					Ensure the Name, Designation, Address and Contact				
State/ Union Territory *					number of the attesting offi- cer in at least one of the at-				
Country*	: PIN Co	ode*			testation document.				
Telephone Number* (with ST									
Mobile Number*				SIGN AC	ROSS PHOTO				
Email id*									
Email ra									
	Sect	ion 2: Identit	y Proof Details						
Photo Identity Proof *			Address Proof *						
Identity Proof Name			Address Proof Na	me					
( Eg: Pan Card, DL, Passport,)  Identity Proof Number			( Eg: Passport, DL, Latest Telephone Bill,)						
			5 5 5	1					
Note*: Subscriber's signature sh	nould appear on the Photo ID Proof	ection 3 : De	claration						
l bandar da dana that all the infa	11,000		AND CONTRACTOR OF THE CONTRACT		and compatite the least				
	rmation provided in this Subscripti s a subscriber for the digital signatu								
	t.com/pdf/cps.pdf) and also under								
	m the CCA or CA for obtaining any	DSC such per	rson shall be punishab	ole with imprisonment up to	2 years or with fine up				
to one lakh rupees or with both.	<u> </u>								
Signature of the Subscriber*			$\leftarrow$	SIGN HE	ERE				
Date*: D D M M Y Y	Y Y Place*:								
Note*: Subscriber has to sign be	efore the Authorised LRA/Partner for	or Class 3 DSC	i,						
	Section 4: A	Authorisation	(only for ORG DSC	C)					
1,				e, that the Subscriber inform					
	r our office records. I fully understa				tion's behalf and I will				
	tal Signature Certificate in case the	e employee lea	ves the company in tu	AUTHORI	ZING PERSONS				
Signature & Organisation sea	al*			SIGN WIT	H COMPANY SEAL				
		For office t	use only	_ =					
Attestation By Sify Authorised LRA/Partner* (For Class3DSC Only)  I hereby declare that the subscriber has personally appeared before me and submitted the			Partner Name:						
original document copies.	riber has personally appeared bet	iore me and su	iornitted the	III. Soo As also cales on Asigo					
Signature and Seal *				Sify RA:					
Date * D D M M Y Y	Y Y Name *			Date of Issuance:					

SafeScrypt CA Services brought to you by:

Note\*: Safescrypt at its discretion, will make a telephone call to verify the details of the Subscriber.

Sify Technologies Limited, 2nd Floor, Tidel Park, #4 Rajiv Gandhi Salai, Taramani, Chennai - 600 113. E-Mail: enquiries@safescrypt.com

### **DOCUMENT CHECKLIST FOR ORGANIZATION CERTIFICATE**

## Document of the Applicant -

\* Proof of Identity: PAN Card of the application – Self attested

Note: Proof of identity and address shall be attested by Banker or Post Master or Group A or Group B Gazatted office. This attestation is not required if applicant process digital signature through Aadhar Card

## Document for Organization - All Documents to be Attested by Authorized Signatory with Stamp or Seal

Type of Organization Document		Partnership	Proprietor ship	Others
Copy of Organization PAN Card / Proprietor PAN Card	V	V	V	V
Copy of Organizational Bank Statement ( Latest 2 Pages)	٧	٧	٧	٧
Copy of Incorporation / Registration Certificate of Organization / Business Registration Certificate (VAT ,ST, S &E)	٧		٧	٧
Copy of Memorandum & Articles / Partnership deed / Bye Laws (First 2 Pages	٧	٧		٧
Copy of Last Audit Report & Annual Return (First 2 Pages)	٧			٧
Copy of Latest ITR With Computation		٧	٧	٧
Copy of Resolution Empowering the Authorized Signatory *	٧			٧

### \*Note:

Resolution not Required if Authorization Made by Directors / Partners of the Organization – Identity Proof of Such Person which contain their Signature Should be attached to the Form

## **Sample Format of Resolution**

### Extracts of the meeting of the [Partners/Board of Directors/Governing Body] of [Name of the Organisation] held on [Date]

"Resolved that Mr. [Name of the person being appointed for authorization], whose details, photo and signature given below, be and is hereby appointed to Authorize [all or any or selected Persons of the Organisation as per list] at [Name of branch/Unit/Department] for obtaining Digital Signatures of [Class 3 with Organisation Name having Validity2 years for Signing] on behalf of the Organisation."

Name of the person Appointed for Authorization:	
Designation :	
Department:	Photo of the Person with seal
Employee Code:	of the Organisation
Employee ID Card No :	
Address:	
Signature:	
Contact No.	
Date:	

**Certified true Copy** 

For [Name of the Organisation]

Signature of the Partner/Director/Chairman/Secretary/Head of Department

<sup>\*</sup> Proof of Address: Aadhar Card or Passport or Driving License - Self attested