DIGITAL CERTIFICATE FOR ORGANISATION - APPLICATION FORM

emudhra
Trust Delivered

For Subscribers of GOVERNMENT ORGANISATION / AGENCIES / DEPARTMENTS

PLEASE FILL IN BLOCK LETTERS ONLY

For form filling please follow the instruction in **http://www.e-mudhra.com/instruction.html**

Application ID (For Office Use Only)

Signature Encryption

Affix recent passport size photograph of the applicant duly signed across

CLASS	TYPE	VALIDITY	USB TOKEN
☐ Class 2	☐ Signature	☐ 1 Year	☐ Required
☐ Class 3	☐ Encryption	☐ 2 Years	☐ Not Required

APPLICANT DETAILS

Name Mr./Ms./Dr. LASTNAME FIRSTNAME MIDDLENAME

Date of Birth DDMMYYYY Gender ☐ Male ☐ Female Nationality

ORGANISATION DETAILS

Organisation Details ☐ Corporate Office ☐ Head Office ☐ Registered Office ☐ Branch Office

Organisation Name

Department

Address

City State Pin code

Telephone Mobile Fax No

PAN of Organisation PAN of Applicant

Email ID

Declaration

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 Digital Signature Certificate request form is true and correct to the best of my knowledge and I accept publishing my certificate information in e-Mudhra repository.

Date

Place

Seal & Stamp (If any) Signature of the applicant

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.

Date

Place

RA Name, Code & Seal Signature of RA

AUTHORISATION LETTER

To,

Date:

eMudhra Consumer Services Limited
3rd Floor, Sai Arcade, 56 Outer Ring Road
Deverabeesanahalli, Opp Intel
Bangalore 560103
Phone: +91 80 4336 0000

Dear Sir,

Sub: **Authorisation letter for obtaining Digital Signature Certificate.**

This is certify that Mr./Mrs./Miss. _____ (Certificate applicant) has provided correct information in the 'Application form for issue of Digital Signature Certificate" to the best of my knowledge and belief. I hereby authorize him/her, on behalf of our Organisation to apply for obtaining the following Class of Digital Signature Certificate issued by e-Mudhra.

☐ Class 2 Organisation ☐ Class 3 Organisation

Details of Executive Authorising the applicants:

Signature: Name:

Designation: Employee Code:

Department:

Office Seal and Stamp

Contact Details

eMudhra Consumer Services Limited, 3rd Floor, Sai Arcade, 56 Outer Ring Road, Deverabeesanahalli, Opp Intel, Bangalore 560 103. Karnataka
Phone : +91 80 4336 0000 Fax : +91 80 4227 5306 Email : info@e-mudhra.com Web:www.e-mudhra.com