

DIGITAL CERTIFICATE FOR ORGANISATION - APPLICATION FORM



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

CLASS	TYPE	VALIDITY
<input type="checkbox"/> Class 2	<input type="checkbox"/> Signature	<input type="checkbox"/> 1 Year
<input type="checkbox"/> Class 3	<input type="checkbox"/> Encryption	<input type="checkbox"/> 2 Years

Affix recent passport size photograph of the applicant duly signed across

USB TOKEN

Required Not Required

Applicant Details

Name Mr./Ms./Dr. LAST NAME FIRST NAME MIDDLE NAME
Date of Birth Gender Male Female Nationality

ORGANISATION DETAILS

Organisation Details Corporate Office Head Office Registered Office Branch Office
Organisation Name
Department
Registration Number
Date of Incorporation/Proprietorship Commencement/Partnership Agreement DDMMYYYY
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

IDENTIFICATION DETAILS

Valid Identity Documents (Any one of below)

- Passport
 Driving License
 PAN Card
 Post Office ID Card
 Aadhaar Card
 Bank Account Passbook
 Government ID Card

ID Number _____

UNDER CHECKLIST OF ORGANISATION DOCUMENTS TO BE SUBMITTED ALONG WITH THE APPLICATION

- a. ID proof of the applicant
 b. Attested copy of any one of the below documents
 Certificate of Incorporation
 Memorandum of Association
 Regd. Partnership deed
 Valid Business License
 Annual Report
 Latest Income Tax Return
 Latest Organisation Bank Details from the Bank
 Statement of Income issued by Chartered Accountant
 c. Attested copy of Organisation PAN card
 d. Authorisation letter in favour of the Certificate Applicant from the Organisation as per the format overleaf
 e. List of Partners/Members/Directors with their complete Name and Addresses

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 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