

APPLICATION FORM - CODE SIGNING CERTIFICATE



CLASS 3

Application ID: (For Office Use Only)

PLEASE FILL IN BLOCK LETTERS ONLY. ALL FIELDS ARE MANDATORY

More Instructions available at: <http://www.e-mudhra.com/instruction.html>

APPLICANT INFORMATION

Applicant Name:

Designation:

Date of Birth: Gender Male Female Mobile:

Email ID:

Affix recent passport size photograph of the applicant **duly signed across**

ORGANISATION INFORMATION

Organisation Name:

Department:

Address:

City: State:

Pin code: Country:

Type:

Code Signing Certificate

VALIDITY:

1 Year 2 Years 3 Years

Class 3 Certificate:

I/We understand that Class 3 certificate should originate and be stored in a FIPS certified Hardware Security Module (HSM). We declare and assure that the CSR is originated by the key-pair generated in our HSM, and we confirm eMudhra to certify those CSR, and issue the certificate (.cer).

DOCUMENT PROOF (attested by Authorized Signatory of the Organization)

Organization Type: Government Bank Company Partnership Proprietorship AOP/BOI LLP NGO/TRUST

| Document Name | Government | Bank | Company | Partnership | Proprietorship | AOP/BOI | LLP | NGO/Trust |
|--|------------|------|---------|-------------|----------------|---------|-----|-----------|
| Copy of Applicant's Organizational ID Card / Letter from Organization | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Copy of Organizational PAN Card | | ✓ | ✓ | ✓ | | ✓ | ✓ | ✓ |
| Copy of Bank Statement (First 2 Pages) | | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Copy of Incorporation/Registration Certificate | | | ✓ | | | ✓ | ✓ | ✓ |
| Copy of AOA & MOA / Rules / Bye laws (First 2 Pages) | | | ✓ | | | ✓ | | ✓ |
| Copy of Last Income Tax Return / Audit Report & Annual Return / Self Affidavit with reason, if not available (First 2 Pages) | | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Copy of Partnership Deed / Trust Deed / LLP Agreement containing the List of Partners / Signatories (2 Pages) | | | | ✓ | | | ✓ | ✓ |
| Copy of Business Registration Certificate (S&E / GST / Any other Government Registration) | | | | | ✓ | | | |
| Proof of Authorized Signatory (Board Resolution) | | | ✓ | | | ✓ | ✓ | ✓ |
| Authorized Signatory Organizational ID Card / Self-Attested Letter of Organizational Identity | ✓ | ✓ | | | | | | |

DECLARATION BY APPLICANT

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 form is true & correct to the best of my knowledge. I accept publishing my certificate information in e-Mudhra repository.

Date:

Place:

Signature of the applicant

Authorized Signatory of Applicant's Organization

I hereby authorize this application on behalf of the organization. I hereby confirm the mobile of Applicant given above. I also confirm the Physical Verification of Applicant.

Name:

Designation:

Telephone:

Email:

Authorized Signatory (Sign and Seal)