

PAYMENT DETAILS*

13. Mode of Payment *

Demand Draft

Online Payment Details

Transaction/Reference No.

Bank Name

Account Type

Amount Rs.

Date

DD Payment Details

DD No.

Bank & Branch Name

Account Type

Amount Rs.

Date

DECLARATION*

I hereby agree that I have read and understood the provisions of eMudhra 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 eMudhra repository.

Date : _____ Place: _____ Name of the Applicant: _____
Office Seal & Stamp: _____ Signature: _____

CHECKLIST OF DOCUMENTS TO BE SUBMITTED ALONG WITH THE APPLICATION*

- a. ID proof of applicant as selected in S.No. 12
- b. Authorisation letter in favour of the certificate applicant from the department / organisation as per format below

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.

RA Name : _____
Signature : _____
Place : _____
Date : _____

RA Seal & Stamp

AUTHORISATION LETTER FORMAT* (This is required on the organization letter head duly signed by the Head of Office or JS (Admin.) for Government Sector

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

Date: _____

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" as a subscriber of Government Sector to the best of my knowledge and belief vide application form dated DD-MM-YYYY. 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 3 Platinum Organisation

Details of Executive Authorising the applicants:

Signature: _____ Name: _____
Designation: _____ Employee Code: _____
Department: _____

Office Seal and Stamp

CONTACT DETAILS

KYC REPORT



Application No :

Application Type Individual Organization Banks Government Department / Organisation

KYC INFORMATION

1. Applicant Name : Mr./Ms/Dr. FIRST NAME MIDDLE NAME LAST NAME

2. Employee ID Number (Mandatory for Bank and Government employees)

APPLICANT DETAILS

3. Name of the applicant : Verified

Address Visited Details

5. Physical Verification of the Applicant Verified
(Mandatory for Class III Digital Signatures)

Place of Meeting:

Land Mark if any:

DOCUMENTARY EVIDENCE (Select as per Application Type) ORIGINAL VERIFIED

For Individual

6. Valid Identity Documents : * Passport Copy of Driving License PAN card Post Office ID Card
 Bank Account Passbook containing the Photograph and signed by an individual with attestation by the concerned Bank official
 Photo ID Card issued by the Ministry of Home Affairs of Centre/State Government
 Any Government issued photo ID Card bearing the signature of the individual

(Please tick any one and fill the ID number and attach attested (***) copy of ID proof) ID Proof Number:

7. Valid Address Proof Documents : * a) Telephone Bill b) Electricity Bill c) Water Bill d) Gas Connection
 e) Bank Statements signed by the Bank f) Service Tax /VAT/Sales Tax registration certificate g) Property Tax/Corporation/Municipal corporation receipt
 h) Driving Licence i) Voter ID Card j) Passport k) Certificate of Registration for owned Vehicle

(Please tick any one and fill the Document number and attach attested (***) copy of address proof) Doc No. _____

Note: For A to E the date of last transaction should not be older than 3months, for S.No. F & G the same should be pertain to the current financial year.
All documents should have the complete address for the purpose of accepting the same as proof.

For Organization

8. Organization Documents : a) Anyone from S.No. 6
b) Certificate of incorporation Memorandum of Association Partnership Deed Valid Business Licence
c) Organisation Bank details from the Bank Statement of Income issued by Chartered Accountant Latest Income Tax Annual report
d) Organisation PAN Card e) Authorisation Letter from the Organisation

9. I hereby certify that I have appeared physically in front of Ra's Representative _____ of date _____ at time _____ to process my application for DSC.

Signature of the applicant

KYC REPRESENTATIVE DETAILS - MEETING THE CUSTOMER

KYC Representative name	
KYC Representative Designation	
Date of Visit	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>
Application form & Credentials collected	
Acknowledgment	I hereby acknowledge the receipt of the Application Form for DSC from the above customer.
Signature of the Representative	
RA Details	Antares Systems Limited, 24, Sudha Complex, III Stage, IV Block, Basaveshwaranagar, Bangalore-560079
CA Details	eMudhra Consumer Service Limited, 12/27, First Floor, Udayappa Colony, Salem - 636 007. Tamil Nadu Phone : +91 80 4336 0000 Fax : +91 80 4227 5306 Email : info@e-Mudhra.com Website: www.e-Mudhra.com