

Digital Signature Certificate Subscription Form

AND A STATE OF THE PROPERTY OF	Individual Signing 1 Year							
Class of Certificate Class 3 With Org	Name Encryption	2 Years	est Id:					
Section 1: Subscriber Details								
News*:								
Name*:								
Designation :				+0 // 4// 1 / 10/ 1				
Date of Birth*:	Y Y Gende	*: Male	Female	* Self Attested Photo				
Address (Residential address in case of Individual o	Organization address in case of I	OSC with ORG)						
Organisation Name * : (Mandatory in case of ORG DSC)								
Door No/Building Name * :								
Road/ Street/ Post Office * :				 Use blue-ink only including signature. 				
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 Code*			testation document.				
Telephone Number* (with STD Code):								
Mobile Number* :								
Email id*								
	Section 2: Ide	ntity Proof Details						
Photo Identity Proof *		Address Proof *						
Identity Proof Name		Address Proof Nam	е					
(Eg: Pan Card, DL, Passport,)		(Eg: Passport, DL, Latest						
Identity Proof Number		Telephone Bill,}						
Note*: Subscriber's signature should appear or	the Photo ID Proof.							
	Section 3:	Declaration						
I hereby declare that all the information provide								
of my knowledge. I am aware, as a subscriber f				* * * * * * * * * * * * * * * * * * * *				
CA CPS (https://www.safescrypt.com/pdf/cps.pdf) and also under the Section 71 of IT Act which stipulates that if anyone makes a misrepresentation or suppresses any material fact from the CCA or CA for obtaining any DSC such person shall be punishable with imprisonment up to 2 years or with fine up								
to one lakh rupees or with both.	5 ,		,	,				
Signature of the Subscriber*								
Date*: D D M M Y Y Y Place*:								
Note*: Subscriber has to sign before the Authorised LRA/Partner for Class 3 DSC.								
The state of the s		tion (only for ORG DSC)						
Ι,			that the Subscriber informat	tion in this document				
is complete and accurate as per our office reco	- Collection							
ensure timely revocation of Digital Signature C	ertificate in case the employee	leaves the company in futu	re.					
Signature & Organisation seal*								
	For offi	ce use only						
Attestation By Sify Authorised LRA/Partne	er* (For Class3DSC Only)			4				
I hereby declare that the subscriber has person		d submitted the	Partner Name:					
original document copies.			Sify RA:					
Signature and Seal *	8		Date of Issuance:					
Date * D D M M Y Y Y Y Nam	3	allo of the Subscriber	Date of issuance.	10				
Note*: Safescrypt at its discretion, will make a t	elephone call to verify the deta	and of the oudstriber.						

SafeScrypt CA Services brought to you by:

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

Important Instruction Class 2 - Organization (Indian National) (Non Aadhaar eKYC based)

The Controller of Certifying Authorities of India has specified Identity Verification Guidelines and has made the same Mandatory w.e.f. July 01 2015. In accordance with the guidelines the Applicant should comply with the following.

Section 71 of IT Act stipulates that if anyone makes a misrepresentation or suppresses any material fact from the CCA or CA for obtaining any DSC such person shall be punishable with imprisonment up to 2 years or with fine up to one lakh rupees or with both.

- Please fill the form in BLOCK LETTERS in English. Use only <u>Blue Ink</u>. All signatures including DSC applicant, attestation and authorization should be with blue-ink only.
- Subscriber has cross-signed the photograph extending to the Application Form.
- If the Signature on the Proof of Identity or Proof of Address does not match with the Signature on the Subscription Form, it should be validated by the bank where the Subscriber holds a bank account.
- In the case of applicant is unable to sign due to disability, paralysis, or other reasons, the DSC issuance should be through Aadhaar eKYC service.
- Power of attorney is not allowed to sign on behalf of subscriber.
- Inconsistent/incomplete applications are liable to be rejected.
- Subscriber's Email ID in the application should be a valid and active, in order to issue the certificate.
- Mobile Number of DSC Subscriber is Mandatory.
- USB Token (FIPS 140-1/2 level validated Hardware Token) is required for generation of Signing Certificates.
- Proof of PAN is mandatory if PAN value is to be included in the Certificate (Required for Income Tax)

Document for Indian Nationals – Self Attested in BLUE INK

Document as proof of identity (Any one)

- a) Valid Passport
- b) Valid Driving License
- c) PAN Card
- d) Valid Post Office ID card
- e) Bank Account Passbook containing the photograph and signed by an individual with attestation by the concerned Bank official.
- f) Valid Photo ID card issued by the Ministry of Home Affairs of Centre/State Governments.
- g) Any Government issued valid photo ID card bearing the signatures of the individual.

Attestation

Copy of supporting document should be attested by Authorised executive/Manager of the Bank or Post Master or Group 'A' or Group 'B' Gazetted officer after physical verification of original documents and with his Seal & Signature specifying his Name, designation, office address and contact number which should be clearly visible.

Group 'A' Gazetted officers include

- a) All India services though posted to states
- b) Promotes from states to the cadre of Assistant commissioner and above
- c) Police officers (Circle Inspector and above)
- d) Additional District Civil surgeons
- e) Executive Engineers and above
- f) District Medical Officer and above
- g) Lt. Col and above
- h) Principals of Government Colleges and above
- i) Readers and above of Universities
- j) Patent Examiner etc.

Group 'B' Gazetted officers include

- a) Section Officer
- b) BDO (Block Development Officer)
- c) Tahsildar
- d) Junior Doctors in Government Hospitals
- e) Assistant Executive Engineer
- f) Lectures in Government colleges
- g) Headmaster of Government high schools
- h) 2nd Lieutenant to Major
- i) Magistrate etc.

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	٧	٧	٧	٧
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 Employee ID / Payslip of Authorizing Person (Who has authorized in Section -4 of the Form)	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

Government Employee

Identity verification requirements are as mentioned below:

- a) Applicant's Valid identity card
- b) Forwarding Letter by the Head of Office.
- c) A letter/notification from Head of Department authorizing the Head of Office
- d) The attestation of documents may be carried out by Head of the Office/Gazetted Officer. The attestation should contain Signature, Seal, Name, Designation, Office address and contact number of the attestation Officer.
- e) For Class 3 certificate Head of Department should certify the physical verification of subscriber with his signature and seal mentioning his Name, designation, office address and contact number.

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 ___ with Organisation Name having Validity___ years for Signing/Encryption/Both Signing & Encryption] on behalf of the Organisation."

Name of the person Appointed for Authorisation:	
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