

Customer Identification Number : \_\_\_\_\_ (for office use only)

PLEASE TICK ANY ONE

Class2

OR

Class3



Validity 2 Years

OR

Validity 1 Year

Only Signing

OR

Sign & Encrypt

### INSTRUCTIONS :

- Please fill the form in English only in legible format and **IN BLUE INK ONLY**.
- OID would be as per our CPS. Please refer to our CPS at [www.ncodesolutions.com/cps.pdf](http://www.ncodesolutions.com/cps.pdf) for more information.
- Incase of keypair been compromised/lost/deleted, please apply for revocation of certificate.
- For obtaining Class 3 "Video recording of DSC applicant" is mandatory as per CCA - Guidelines.
- Incomplete application is liable for Rejection. The rejected form would be physically discarded after 15 days from the date of rejection. No request would be entertained with respect to rejected form after the rejection period.
- All supporting documents should be attested by Gazetted Officer or Bank Manager or Post Master and the Name, designation, office address and contact number of the attesting officer should be clearly visible.
- FIPS 140-1/2 level validated Hardware cryptographic token required to download the DSC.

### Applicant Name

APPLICANT TO SIGN ACROSS THE PHOTOGRAPH EXTENDED TO APPLICATION FORM ▶

Surname

First Name

Middlename

Unique Email ID

Unique Mobile No.

Affix recent  
passport size  
photograph of the  
applicant

Identity Details of Applicant DOC No.

- \*PAN Card  
  Driving License  
  Passport  
  Govt. ID Card  
  Postoffice ID Card  
  Copy of Bank Account Passbook containing photo & signed by applicant with attestation by concerned Bank Officer

Tick any one and enclose the attested copy of same. (\*For PAN based DSC, please provide the PAN Card details.)

Organization Name

Organizational Email ID

Govt. ID Card Detail  
(Enclose attested copy)

Department

Office Address

As per supporting document submitted

Area / Landmark

Town/City/District

State

P I N C O D E

### PLEASE NOTE :

"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.

### DECLARATION :

- In case of submission of Aadhaar Card Details, I provide my consent to (n)Code Solutions for using Aadhaar Card details for my identity authentication only.
- I hereby agree that I have read and understood (n)Code Solutions CPS and the subscriber agreement and promise to abide the same. I have read and understood guidelines for storage of private keys mentioned in (n)Code Solutions CPS.
- I hereby authorise (n)Code Solutions to conduct mobile verification as per CCA guidelines, on the number mentioned above.

Date :

Place :

Signature of Applicant with seal of Organization (Blue Ink Only)

Verified by (n)Code Office

Seal & Signature

For RA use only

All Documents, address and physical presence verified by

RA Name, Seal & Signature



Customer Identification Number : \_\_\_\_\_ (for office use only)



## Documents Required for Verification

### Attested copy of following for Government Application

- A. Applicant's identity card.
- B. The application for DSC should be forwarded/Certified by the authorized signatory (Competent authority of the Department/ Head of Office / NIC Coordinator).
- C. Copy of identity card of authorised signatory.

**Note :**

- A. For Class 3 certificate, HOD should certify the physical verification of subscriber. with a statement similar to that used for life certificate of pensioners
- B. The attestation of documents may be carried out by Head of the Office/Gazetted Officer.

### PAYMENT DETAILS

Date : \_\_\_\_\_ Bank Name : \_\_\_\_\_ DD / Cheque No. : \_\_\_\_\_ Amount : \_\_\_\_\_

## Authorization Letter

To,  
(n)Code Solutions (A Division of GNFC Ltd.)

This to certify that

Mr. / Ms. \_\_\_\_\_ (certificate applicant)

Mobile \_\_\_\_\_ has provided correct information in the application form for issue of Digital Certificate to the best of my knowledge and belief and is working with \_\_\_\_\_ (organization name). I certify the physical verification of the applicant. He / She is hereby authorized to obtain a Digital Certificate issued by (n)Code Solutions.

### DETAILS OF AUTHORISING PERSON

Name	<input type="text"/>		
Designation	<input type="text"/>	Identity	<input type="text"/>
Date	<input type="text"/>	Signature of Authorising Person (Blue Ink Only) (with seal of Organization)	
Place	<input type="text"/>		
		[Sign :	]

### (n)Code Offices

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