

Digital Signature Certificate Subscription Form

Class of Certificate	Class 2	<input type="checkbox"/>	Individual	<input type="checkbox"/>	Signing	<input type="checkbox"/>	1 Year	<input type="checkbox"/>	Request Id:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Class 3	<input type="checkbox"/>	With Org Name	<input type="checkbox"/>	Encryption	<input type="checkbox"/>	2 Years	<input type="checkbox"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Section 1: Subscriber Details

Name*:

Designation:

Date of Birth*: Gender*: Male Female

Address (Residential address in case of Individual or Organization address in case of DSC with ORG)

Organisation Name * :

Door No/Building Name * :

Road/ Street/ Post Office * :

Town/ City/ District * :

State/ Union Territory * :

Country* : PIN Code*

Telephone Number* (with STD Code):

Mobile Number* :

Email id* :



- Use blue-ink only including signature.
- Ensure the Name, Designation, Address and Contact number of the attesting officer in at least one of the attestation document.

Section 2: Identity Proof Details

Photo Identity Proof * Identity Proof Name <input type="text"/> (Eg: Pan Card, DL, Passport, ...) Identity Proof Number <input type="text"/>	Address Proof * Address Proof Name <input type="text"/> (Eg: Passport, DL, Latest Telephone Bill, ...)
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Note*: Subscriber's signature should appear on the Photo ID Proof.

Section 3: Declaration

I hereby declare that all the information provided in this Subscription form for the purpose of obtaining a digital certificate is true and correct to the best of my knowledge. I am aware, as a subscriber for the digital signature certificate, the duties and responsibilities which are applicable under the SafeScript CA CPS (<https://www.safescript.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.

Signature of the Subscriber*

Date*: Place*:

Note*: Subscriber has to sign before the Authorised LRA/Partner for Class3 DSC.

Section 4: Authorisation (only for ORG DSC)

I, _____ acknowledge by my signature, that the Subscriber information in this document is complete and accurate as per our office records. I fully understand that the Subscriber is responsible to transact on the Organisation's behalf and I will ensure timely revocation of Digital Signature Certificate in case the employee leaves the company in future.

Signature & Organisation seal*

For office use only

Attestation By Sify Authorised LRA/Partner* (For Class3DSC Only)
 I hereby declare that the subscriber has personally appeared before me and submitted the original document copies.

Signature and Seal *

Date * Name *

Note*: Safescript at its discretion, will make a telephone call to verify the details of the Subscriber.

Partner Name:	<input type="text"/>
Sify RA:	<input type="text"/>
Date of Issuance:	<input type="text"/>

Authorization Letter by Organization

(To be printed on organization letter head / Office seal. To be signed by Authorized Signatory / Government Department in-charge. To be used, if the authorization is not made on Application Form.)

attested ID proof of Authorizing Officer is Mandatory Must Attach along wapplication and this letter

Subject: Authorization of the applicant by the organization

I hereby Authorize the below applicant to apply for Digital Signature / Encryption Certificate, on behalf of the Organization.

Organization Name: _____

Name of the Applicant	
Org ID Number (if available)	
Designation	
Mobile Number	

Class of Certificate Class 2 Class 3

Type of the Certificate Signature Encryption Combo

I hereby confirm the mobile number of Applicant given above. In case of class 3, I confirm the Physical Verification of Applicant.

For the Organization,

(Seal & Signature)

Name: _____

Designation: _____

Applicant PhotoGraph Attested by Authorizing Officer
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Check List for the documents required for Digital Signature

- One copy of Id Card which is issued by Government department.
- One ID proof (Pan Card, Driving License, Passport, department Identity Card)
- One address proof (Driving License, Aadhar Card, Passport, Voter Card) mentioned address in application form should be matched with attached address proof.
- One Passport Size photograph pasted on Form (cross-signed by applicant himself and also attested by the Gazetted officer/Banker/Post Master)
- **All supporting documents (ID Proof & Address Proof) should be attested by the Gazetted officer/Banker/Post Master and also self attested.**
- Section 4 of subscription form should be attested by head of the department with his sign and organisation seal.

Note :- Ensure that the Subscriber and the authorised person signature(form filling) will be in **BLUE INK.**