APPLICATION FOR DIGITAL SIGNATURE CERTIFICATE - FOR INDIVIDUAL



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Application ID Number (For office	use only): 📙																									
nstructions: I. Please fill the form in BLOCK LETTERS and (*) MARKED Fields are Mandatory. (For Encryption Application only)																										
. Please fill the form in BLOCK LETTERS and (*) MARKED Fleids are Mandatory Inconsistent/incomplete applications are liable to be rejected (**) Attestation of documents by any: Gazetted Officer OR Bank Manager OR Post Master OR present originals to our Registration Authority for verification & attestation All subscribers are advised to read Certification Practice Statement and subscriber agreement of eMudhra available at www.e-mudhra.com . At par cheques/Demand draft drawn in favour of eMudhra Consumer Services Limited payable at Bangalore . All customer documents need to be self attested by the customer over and above the third party attestation . For Class III Digital Signatures "In Person Verification" of the applicant is mandatory														n.	Affix recent passport photograph of the applicant duly signed across											
1A. CERTIFICATE	CLASS*	•	IB. CE	ERTI	FICAT	ΓΕ Τ	/PE*		2	. C	ERTI	FIC	ATE	E VA	ALIC	TIC	/ *	3.	US	3B	то	KE	N*			
Class 2 Gold Individual		Signature								1 Year										Required						
Class 3 Platinum Individual		Encryption								2 Years										Not Required						
APPLICANT DETAILS* (As per applicant's valid ID Proof and Address Proof at SI.No.1 & 14 below)																										
4. Name:* Mr./Ms./Dr.	FIR	SI	NA	ME			M		D D	L	EN	I A	M	E		T		TL	A	S	Т	N /	4 N	1 E		
5. Date of Birth:*	DDMMYYYY 6. Gender:* Male							e	Fer	nale	1 1	side	:* Resident													
8. Father/ Spouse Name*:	Spouse Name*:																	_		y I N D I A N						
10. eMail ID* (Valid and active I	E-mail ID to I	be includ	ded in the	e Digita	l Signat	ure Ce	rtificate)		Ť			П	寸	Ť	Ħ			Т	Ť	П	寸	Ť	Ť	Ħ		
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11. Address for communic	ation* : (As per	proof	Subn	nitted)									·												
(Door No., Name of the premises,	Road, Area, Ci	ty, State a	and Pin co	de need	ds to be f	illed)																				
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11. a) Pincode*		City						\perp	\perp		State		+	\pm		\perp	+	+	\perp	Ш	\pm	\pm	\pm			
,		City		$\overline{}$	1												$\frac{\perp}{\perp}$		\vdash	Ш	\pm	\pm	\pm			
1. b) Mobile No.* Telephone No. (e.g. +91-80-233333333) Check list for IDENTIFICATION and DOCUMENTATION DETAILS*																										
12. PAN Number :	Office	K IISt			ted copy																					
	tc · *	Passpo	ot [_	y of Driv			Io mai	PAN						O Car											
13. Valid Identity Documen					•											-			~ d D	ا مماد	-tt:-:					
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	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:																										
14. 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																										
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h) Driving Licence i) Vote	_																									
(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.																										
15. Payment Details: Cheque / D				¬ -	her Mod	-							Amo	unt F	Rs.		Τ									
Date	D D M	MY	YY		ank:															_						
						DECL	ARA	TIOI	٧*																	
I hereby agree that I have read and uprovided in this Digital Signature Certificevoke my Digital Signature Certifical issuance of Digital Signature Certifica	ficate request te, if physical	form is tr	ue and co	orrect to	the best	of my kr	nowledg	e and I	acce	ot pul	olishing	my ce	ertifica	te inf	ormati	on in	e-Mu	dhra	repos	sitory	y. I he	ereby	con	sent to		
Date:	Place:																									
Seal & Stamp [If available]:											S	Signatu	ire of	the ap	plicar	nt										
			T	O BE	FILL	ED E	BY RA	A OF	FIC	E	ONLY	/ *														
I declare that the applicant has provide	ded correct in	formatio	n in this a	applicati	on form.	I have	checked	d and v	erifie	d the	applica	ation fo	orm a	nd su	pporti	ng do	cum	ents.								

RA Code & Name/ Seal :

Signature:

Date: Place:

CONTACT DETAILS: eMudhra Consumer Services Limited, 3rd Floor, Sai Arcade, 56 Outer Ring Road, Deverabeesanahalli, Opp Intel, Bangalore 560 103. Karnataka Phone: +91 80 4336 0000 Fax: +91 80 4227 5306 Email: info@e-Mudhra.com Website: www.e-Mudhra.com