

Registration Form for Digital Certificate [Individual]

Customer Identification Number _____ (For office Use Only)



Instructions

1. Please fill the form in BLOCK LETTERS in English only.
2. Any discrepancy/inconsistency in the form will lead to delay and/or rejection of this application.
3. Submit the application to nearest LRA. Please visit www.ncodesolutions.com to locate LRA.
4. (n)21 refers to Class – II- Individual & will bear Object Identification as 2.16.356.100.2.2.
5. The DSC issued would be for Signing only.

Affix recent passport size photograph of the applicant

Applicant to sign across the photograph extended to application form

Validity **1 year** **2 year**
(Only SHA-256)

Name of the Applicant		
Please ensure that the name as it appears in the identity proof matches with the name mentioned below		
Surname	First Name	Initials
Residential Address		
Town/City/District		
State	PIN	
Country		
Contact Number	STD Code	PH
Date of Birth	D D	M M Y Y Y Y
E-mail Address		
Identity Details	Number	
(Please tick and Fill Any ONE)	// Post Office id card // Driving License // PAN // Voter's ID // Bank account Passbook no //	

Details Required If Applicant is Foreign National

Nationality	Passport No.
Visa Details	

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Checklist of the Documents to be Submitted with Application

A. Documents as proof of Identity (Please tick the one submitted)

- PAN Card Driving License Voters ID Post Office ID Card
 Copy of Bank Account Passbook with attested photograph by the Bank

B. Documents as proof of Address (Please tick the one submitted)

- Telephone Bill Water Bill Driving License Service Tax/VAT Tax/Sales Tax registration certificate.
 Electricity Bill Voters ID Gas connection Property Tax/ Corporation/ Municipal Corporation Receipt.
 PF statement Passport Bank Statement attested by the bank.

I hereby agree that I have read and understood (n)Code Solutions CA CPS and the Subscriber Agreement and promise to abide by the same. I have read and understood guidelines for storage of private keys mentioned in (n)Code Solutions CA CPS and risk involved by using other storage devices to store private key. I shall be held responsible for all risks arising out of not using USB Crypto Tokens to store private key.

Date

Place

Signature of Applicant

[Name: _____]

Cheque /DD to be drawn in favor of _____
Cheque should be "payable at par"

Payment Details

DD / Cheque No : _____

Date : _____ Amount : _____

Bank Name : _____

LRA Details

All documents Checked & Verified by

LRA Name / Stamp / Signature

(n) Care

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	(022) 24323027	(022) 24323029	9320037665

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