# APPLICATION FORM - DIGITAL SIGNATURE CERTIFICATE

## For Organisation

### Select Certificate Type

| Application ID (Office Use) | Validity | Class | Type |
|---|---|---|---|
| | ◯ 1 Year ◯ 2 Years | ◯ Class 2 ◯ Class 3 | ◯ Signature ◯ Encryption ◯ Both |

### Applicant Information

Applicant Name : _____ (First Name) _____ (Last Name)

Mobile : +91 - ☐☐☐☐☐☐☐☐☐☐ PAN : ☐☐☐☐☐☐☐☐☐☐

Date Of Birth : ☐☐ / ☐☐ / ☐☐☐☐ (D D / M M / Y Y Y Y) Gender : ◯ Male ◯ Female ◯ Others

Nationality : _____ Org Name : _____

Department : _____ Org PAN : ☐☐☐☐☐☐☐☐☐☐

Photo with cross sign

Address :

Flat / Plot No : _____ Street / Village : _____

Area / Taluka / Mandal : _____ District : _____

City : _____ State : _____ Pincode : ☐☐☐☐☐☐

Email ID : _____ GST No. : ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

### Document Proof (attested by Authorized Signatory of the Organisation)

Organisation Type : ☐ Company ☐ Partnership ☐ Proprietorship ☐ AOP/BOI ☐ LLP ☐ NGO/Trust

| Document Name | Company | Partnership | Proprietorship | AOP/BOI | LP | NGO/Trust |
|---|---|---|---|---|---|---|
| Copy of Organizational PAN Card, If GST No. not provided | ✓ | ✓ | | ✓ | ✓ | ✓ |
| Copy of Recent Bank Statement / Bank Certificate, If GST No. not provided | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Copy of Incorporation Certificate, If GST No. not provided | ✓ | | | ✓ | ✓ | ✓ |
| Copy of Business Registration Certificate (S&E / etc) | | | ✓ | | | |
| Copy of Partnership deed containing list of Partners / Authorization Letter | | ✓ | | | | |
| Proof of Authorized Signatory (List of Directors / Board Resolution / Resolution) | ✓ | | | ✓ | ✓ | ✓ |
| Authorized Signatory ID Proof (Organizational ID Card / PAN Card / etc) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Copy of Applicant PAN Card | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |

### Instructions

1. Fill up the form with Blue ink in English BLOCK letters.
2. Sign the aplication with blue ink.
3. All supporting documents must be attested by Gazetted officer / Bank manager /Post master and the Name, designation, office and address and contact number of the attesting officer should be clearly visible.
4. Incomplete application forms are not accepted.
5. The filled forms must be sent to IDSign CA, Plot No:1303, Khanamet, Ayyappa Society, Hyderabad, Telangana, India, 500081 Phone: +91-40- 42011136.support@idsign.app
6. Applicants must refer to IDSign CA CPS & subscriber agreement at www.idsignca.com.

### Authorization

I hereby authorize the above applicant, on behalf of our Organisation to apply for obtaining the Digital Signature/ Encryption Certificate issued by IDSign CA hereby confirm the Identity of the above Individual and My identity (Authorized Signatory). I'm the Authorized Personal to certify the Identity on behalf of the Organization.

Authorized Signatory (Sign and Seal)

### Declaration by Applicant

1. I agreed to the terms mentioned in IDSign CA Certification Practice Statement (CPS) and subscriber agreement.
2. I confirm the information and supporting documents provided by me are correct.
3. I accept publishing my certificate information in IDSign CA repository.
4. I am aware that Section 71 of the 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 of one lakh rupees or with both.

Date : Place : (Applicant's Signature)

**QCID Technologies Pvt Ltd**
Plot No:1303, Khanamet, Ayyappa Society, Hyderabad, Telangana, India, 500081.
Phone: +91 -40- 42011136 | Email ID: info@idsignca.com