Proof of Sufficient Authorization to act as a Signatory

(To Be Print on Letterhead)

[APPLICABLE TO ALL CENTRAL GOVERNMENT EMPLOYEES, STATE GOVERNMENT EMPLOYEES, EMPLOYEES OF STATUTORY BODIES, PUBLIC SECTOR UNDERTAKINGS AND OTHER GOVERNMENT ORGANIZATIONS]

Date :

To:

QCID Technologies Private Limited

Plot NO 1303 & 1304 4th Floor,

Khanamet, Ayyappa Society,

Madhapur, Hyderabad – 500081

Telangana

I, Controlling / Administrative Authority / Head of Office / Head of Department (HoD) of the

(Organization Name), have understood the requirements of eSign/DSC enrolments under provisions of Information Technology Act, and will authorize the employees in line with these requirements. I have enclosed my ID card of Authorized signatory/identity letter issued by the organization.

**Government Organization Type** (Tick as applicable)**:**

 Central Govt  State/UT  PSU  Statutory / Constitutional / Regulatory Organization

 Judiciary / Quasi-Judicial Organization  Defence Organization  Other

**My Information (Signatory):**

|  |  |
| --- | --- |
| Full Name |  |
| Organization Name |  |
| Position/Designation |  |
| Organization ID Card No |  |
| Office Address |  |
| Office Tel No |  |
| Mobile No |  |
| PAN No |  |
| E Mail ID |  |

Signature: (Seal & Stamp)

Date:

Enclosed: My Organization ID card / Identity letter issued by the organization