

Customer Identification Number : _____ (for office use only)

PLEASE TICK ANY ONE

SSL

OR

Code Signer

OR

Document Signer



Validity 2 Years

OR

Validity 1 Year

Individual

OR

Organization

INSTRUCTIONS

1. Please fill the form in English only in legible format.
2. For obtaining Class 3 "In Person verification and video recording of DSC applicant" is mandatory as per CCA - Guidelines.
3. As a Pre-requisite once the form is processed, Please send SMS as below to any one of these no. 092239 90613, 090163 60370.
[Customer id :Space[**CID NO.**.]Space[**Email:**] Space[_____]
4. All supporting documents should be attested by Gazetted Officer or Bank Manager or Post Master and the Name, designation, office address and contact number of the attesting officer should be clearly visible.
5. Incomplete application is liable for Rejection. The rejected form would be physically discarded after 15 days from the date of rejection. No request would be entertained with respect to rejected form after the rejection period.
6. OID would be as per our CPS. Please refer to our CPS at www.ncodesolutions.com/cps.pdf for more information.
7. In case of keypair been compromised/lost/deleted, please apply for revocation of certificate.
8. FIPS 140-1/2 level validated Hardware cryptographic token required to download the DSC.

Applicant Name

APPLICANT TO SIGN ACROSS THE PHOTOGRAPH EXTENDED TO APPLICATION FORM ▶

Surname

First Name

Middlename

Unique Email ID

Unique Mobile No.

Affix recent
passport size
photograph of the
applicant

GST Number

Identity Details of Applicant DOC No.

- *PAN Card or *Aadhaar Number
 Driving License
 Passport
 Govt. ID Card
 Postoffice ID Card
 Copy of Bank Account Passbook containing photo & signed by applicant with attestation by concerned Bank Officer
- I hereby declare that neither PAN nor Aadhaar Number has been issued to me

*For PAN based DSC, pls provide the PAN Card details and enclose the attested copy of same.

Individual DSC

Residential Address As per supporting document submitted

Area / Landmark

Town/City/District

State

P I N C O D E

Organization DSC

Organization Name

Company PAN

Department

Office Address

As per supporting document submitted

Area / Landmark

Town/City/District

State

P I N C O D E

PLEASE NOTE :

*Section 71 of 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 up to one lakh rupees or with both.

DECLARATION :

1. In case of submission of Aadhaar Card Details, I provide my consent to (n)Code Solutions for using Aadhaar Card details for my identity authentication only.
2. I hereby agree that I have read and understood (n)Code Solutions CPS and the subscriber agreement and promise to abide the same. I have read and understood guidelines for storage of private keys mentioned in (n)Code Solutions CPS.
3. I hereby authorise (n)Code Solutions to conduct mobile verification as per CCA guidelines, on the number mentioned above.
4. I hereby declare and understand that Organizational Document Signer Certificate issued to us will be used only for automated signing of documents/information and will not be used in any other context including individual signature.
5. I hereby declare that necessary controls have been built in software applications to ensure that there is no misuse.
6. I hereby declare and understand that the documents/messages authenticated using Organisational Document Signer Certificate issued to us is having organisational accountability.

Date :

Place :

Signature of Applicant
with seal of Organization

Verified by (n)Code Office

For RA use only

ALL DOCUMENTS, ADDRESS AND PHYSICAL PRESENCE VERIFIED BY

Seal & Signature

RA Name, Seal & Signature

Customer Identification Number : _____ (for office use only)



Details Required if Applying for SSL Certificate

ISP / Domain Details

ISP Name	<input type="text"/>		
Domain Name (Website Address)	<input type="text"/>		
Domain IP Address	<input type="text"/>	Domain Reg. validit up to	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Services offered on the Website	<input type="text"/>		
Domain Registered with (Name of Reg. of Domain)	<input type="text"/>		
Phsical Location (of Server Hosting)	<input type="text"/>		

DECLARATION FOR HSM IN CASE OF (CLASS 2 OR CLASS 3 ORGANIZATIONAL PERSON DSCS)

1. The key pair was generated on a HSM which is under the administrative and physical custody of _____ (Organization Name) and that signing key activation controls are only with _____ (the DSC applicant Name)
2. The HSM will not be used for any purpose other than for signature by _____ (DSC applicant name)
3. The HSM has been configured to ensure that signing keys generated from HSM are not exportable from the HSM
4. DSC will be revoked immediately in the event of _____ (the DSC applicant name) quitting or being transferred from _____ (Organization Name)

THE FOLLOWING ARE THE DETAILS OF THE HSM BEING USED

Make	<input type="text"/>
Model	<input type="text"/>
Unique identification number(s)	<input type="text"/>

GUIDELINES :

1. The domain/IP credentials in the Certificate Signing Request (CSR) are as per the details mentioned in the application.
2. Please confirm the technical specs of Hardware Security Model (HSM)/ Token before applying for DSC.

PAYMENT DETAILS

Date : _____ Bank Name : _____ DD / Cheque No. : _____ Amount : _____

(n)Code Offices

Corporate Office Gandhingar : 079 - 66743300/200 • dscsales@ncode.in

Delhi
011-26452279/80
northsales@ncode.in

Bangalore
080-25206622
southsales@ncode.in

Mumbai
022-22048908
mumbaisales@ncode.in

Customer Identification Number : _____ (for office use only)

Documents Required for Verification



Document Required for SSL Certificate		Document Required for all Class of DSC	
Domain Name Ownership		Existence of Organization (all attested)	
CATEGORY	DOCUMENTS REQUIRED	CATEGORY	DOCUMENTS REQUIRED
Individual / Proprietorship Firm	Affidavit of ownership in the name of individual or proprietorship firm.	Individual / Proprietorship Firm	<ul style="list-style-type: none"> ● Copy of PAN card (Front side page-1) ● Copy of statement of bank account (First and second page) ● Copy of ITR accompanied by computation of income / financial statement Front side page-1)
Partnership Firm	Affidavit of ownership in the name of Partnership firm or in the name of Partner and in case it is in the name of Partner, additional affidavit from Partner confirming authorisation for use by firm.	Partnership Firm	<ul style="list-style-type: none"> ● Copy of partnership deed (Max of first three pages including list of partners and authorized signatories) ● Copy of PAN card (Front side page-1) ● Copy of statement of bank account (First and second page) ● Copy of ITR accompanied by computation of income/financial statement pertaining to last financial year (First and second page)
Corporate Entities	Certificate of ownership in the name of company issued by statutory	Corporate Entities	<ul style="list-style-type: none"> ● Copy of Company Pan Card (Front side page-1) ● Copy of certificate of incorporation(page-1). ● Copy of article and memorandum of association(First two page). ● Copy of statement of bank account (First and second page). ● The copy of audit report along with the annual return pertaining to last financial year (First and second page).
Government Organisations	Domain Name ownership certified by Head of Office.	Government Organisations	<ul style="list-style-type: none"> ● The application for SSL should be forwarded / attested /certified by the Head of Office ● Copy of applicant's official identity

COPY OF SUPPORTING DOCUMENTS SHOULD BE ATTESTED BY ANY ONE OF THE FOLLOWING (THE SEAL AND SIGN OF THE ATTESTING OFFICER SHOULD BE OTHER THEN BLACK)

Gazette officer
 Bank Manager / Authorised executive of the Bank
 Post Master

Authorization Letter

Please Note: The authorized signatories for applying Digital Signature Certificate should be duly authorized by the resolution of board of directors / Partners.

To,
(n)Code Solutions (A Division of GNFC Ltd.)

This to certify that

Mr. / Ms. _____ (certificate applicant) has provided correct information in the application form for issue of Digital Certificate to the best of my knowledge and belief and is working with _____ (organization name). He / She is hereby authorized to obtain a Digital Certificate issued by (n)Code Solutions.

DETAILS OF AUTHORISING PERSON

Name	<input type="text"/>	Designation	<input type="text"/>
Identity	<input type="text"/>	Address	<input type="text"/>
Area/Landmark	<input type="text"/>	Town/City/District	<input type="text"/>
Pincode	<input type="text"/>	Date	<input type="text"/> / <input type="text"/> /2017
Place	<input type="text"/>	Signature of Authorising Person (with seal of Organization)	
		[Sign : _____]	

PHOTOGRAPH OF AUTHORISING PERSON

NOTE : In the case of authorised signatories' self DSC application, It should be counter signed by at least one authorised personal other than authorised signatory.

Delhi
011-26452279/80
northsales@ncode.in

Bangalore
080-25206622
southsales@ncode.in

Mumbai
022-22048908
mumbaisales@ncode.in

e - Safe , e - Secure , e - Sure