

APPLICATION FORM - DOCUMENT SIGNER CERTIFICATE



CLASS 3

Application ID: (For Office Use Only)

PLEASE FILL IN BLOCK LETTERS ONLY. ALL FIELDS ARE MANDATORY

More Instructions available at: <http://www.e-mudhra.com/instruction.html>

APPLICANT INFORMATION

Applicant Name:

Designation:

Date of Birth: Gender Male Female Mobile:

PAN of Applicant: (NOTE : PAN No. is mandatory)

Email ID:

Affix recent passport size photograph of the applicant **duly signed across**

ORGANISATION INFORMATION

Organisation Name:

Department:

Address:

City: State:

Pin code: Country:

GSTIN: (NOTE : GSTIN is mandatory for PAN is mandatory for GSTIN)

Type:

Document Signer

VALIDITY:

1 Year 2 Years 3 Years

Class 3 Certificate:

I/We understand that Class 3 certificate should originate and be stored in a FIPS certified Hardware Security Module (HSM). We declare and assure that the CSR is originated by the key-pair generated in our HSM, and we confirm eMudhra to certify those CSR, and issue the certificate (.cer).

DOCUMENT PROOF (attested by Authorized Signatory of the Organization)

Organization Type: Government Bank Company Partnership Proprietorship AOP/BOI LLP NGO/TRUST

Document Name	Government	Bank	Company	Partnership	Proprietorship	AOP/BOI	LLP	NGO/Trust
Copy of Organizational PAN Card, If GST No. not provided		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Copy of Recent Bank Statement / Bank Certificate, If GST No. not provided			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Copy of Incorporation Certificate, If GST No. not provided			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Copy of Partnership deed containing list of Partners / Authorization Letter				<input checked="" type="checkbox"/>				
Copy of Business Registration Certificate (S&E / etc)					<input checked="" type="checkbox"/>			
Proof of Authorized Signatory (List of Directors / Board Resolution / Resolution)			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Authorized Signatory ID Proof (Organizational ID Card / PAN Card / etc)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> (If applicant is not a proprietor)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Copy of Applicant PAN Card	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Undertaking for HSM based CSR & certificate download	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Note: Templates for certain documents can be found at <https://www.e-mudhra.com/repository>

DECLARATION BY APPLICANT

I hereby agree that I have read and understood the provisions of e-Mudhra Certification Practice Statement (CPS) and the subscriber agreement and will abide by the same. The information provided in this form is true & correct to the best of my knowledge. I accept publishing my certificate information in e-Mudhra repository. 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. I hereby declare that necessary controls have been built in software applications to ensure that there is no misuse. 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 the applicant

Authorized Signatory of Applicant's Organization

Name:

Designation:

Telephone:

Email:

Authorized Signatory (Sign and Seal)

Undertaking by Organization for HSM based Certificate Download

(To be printed on organization letter head / Office seal.

To be signed by Authorized Signatory / Government Department in-charge.)

To:

eMudhra Limited

Bangalore

Subject: Declaration and Authorization for Certifying the Key Pair generated through the HSM

We hereby enclose the "Certificate Signing Request" (CSR) against the enclosed application by Applicant (Name) _____

towards eMudhra Certificate. We declare and assure that:

- The CSR is originated by the key-pair generated in the Hardware Security Module (HSM) and we shall import the 'CA Reply' (.cer) to this HSM and use the certificate.
- We shall ensure all responsibilities towards securing the key/certificate, and implement all measures to avoid unauthorized access/usage of this key/certificate.
- The key in the HSM is marked as Non-exportable

Certificate Information (Tick the applicable one)

Class 2/3 Signature (Organization Individual)

- We confirm that, key(s) in the HSM are of single user (DSC applicant) and are in full control of applicant.
- We confirm that, HSM is under the administrative & physical custody of Organisation and this signing key activation controls are only with the DSC applicant.
- We confirm that, Organization will submit the revocation request for DSC immediately in the event of the DSC applicant quitting or being transferred from the Organisation.

Class 2/3 Encryption Certificate

Class 3 Document Signer Certificate

Class 3 SSL Certificate

HSM Information

HSM Manufacturer: _____

HSM Model: _____

FIPS 140-2 Level: 2 3

HSM Serial Number: _____

We authorize eMudhra to certify given CSR, and issue the certificate (.cer)

For the Organization,

(Seal & Signature)

Name: _____

Designation: _____

Authorization Letter by Organization

(To be printed on organization letter head / Office seal. To be signed by Authorized Signatory / Government Department in-charge. To be used, if the authorization is not made on Application Form.)

To:

eMudhra Limited
Bangalore

Subject: Authorization of the applicant by the organization

I hereby Authorize the below applicant to apply for Digital Signature / Encryption Certificate, on behalf of the Organization.

Organization Name: _____

Name of the Applicant	
Org ID Number (if available)	
Designation	
Mobile Number	

Class of Certificate Class 2 Class 3

Type of the Certificate Signature Encryption Combo

I hereby confirm the mobile number of Applicant given above. In case of class 3, I confirm the Physical Verification of Applicant.

For the Organization,

(Seal & Signature)

Name: _____

Designation: _____

Board Resolution (Suggested format)

(To be printed on organization letter head)

CERTIFIED TRUE COPY OF THE RESOLUTION PASSED AT THE MEETING OF THE BOARD OF DIRECTORS
OF (Company Name) _____ HELD ON (Date) _____
AT (Address) _____

RESOLVED THAT the company has decided to authorize, Mr. / Ms. _____
_____ and is hereby authorized to sign and submit all the necessary papers, letters,
forms, etc to be submitted by the company in connection with “authorizing any of the personnel of
the company (applicant) to procure Digital Certificate”. The acts done and documents shall be binding
on the company, until the same is withdrawn by giving written notice thereof.

Specimen Signatures of Authorised Signatory:

(Signature)

RESOLVED FURTHER THAT, a copy of the above resolution duly certified as true by designated director
/ authorised signatory of the company be furnished to eMudhra Limited and such other parties as may
be required from time to time in connection with the above matter.

For the Organization,

(Seal & Signature)

Name: _____

Designation: _____

Letter of Identity Proof by Organization

(To be printed on organization letter head / Office seal. To be signed by HRD of Organization / Authorized Signatory / Government Department in-charge. To be used if the Organizational ID card is not available for the applicant.)

To:

eMudhra Limited

Bangalore

Subject: Organizational ID Proof of the applicant

Organization Name: _____

Name of the Individual	
Org ID Number (if available)	
Designation	
Department	

I hereby confirm the Identity of the above Individual. I'm the Authorized Personnel to certify the Identity on behalf of the Organization.

For the Organization,

(Seal & Signature)

Name: _____

Designation: _____