DSC FOR GOVERNMENT ORGANIZATION

This form is applicable to officers of Central Government / State Government / PSUs / Autonomous body of Central Government /

SIGNATURE IN BLUE INK ONLY. FORMS FILLED OTHER THAN BLUE INK SHALL BE REJECTED*

Please select Certificate type

TIP: Please select class of certificate and validity.

Class 2 3 Year 1 2 3	Type Sign Sign & Encrypt Encrypt
----------------------	----------------------------------

Please fill the applicant details

TIP : The certificate would be issued in the following name.

APPLICANT	Name	PAN Number
	E-mail ID	Mobile No.

CERTIFICATE DIGITAL

Licensed Certifying Authority

v-2.0 - 13.07.2017

Applicant ID (Internal use) Order ID (Internal use)

Please fill organization details

TIP : Please tell us about your organization.

Organization Name			
Organization Address			
Department	Designation	TAN Number(If applicable)	
Pin Code	Town/City/District	State/Union Territory	
GST No.			

Doo	cuments Required:	2
	Applicant's Identity Card or Proof of individuals association with organization.	
	Authorization letter forwarded / Certified by Department / Head of Office / Coordinator mentioning Mobile number and eMail address of the applicant (In letterhead).	



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 liable for punishment with imprisonment up to 2 years or with fine up to one lakh rupees or both.

Instructions:

- **1.** Please fill up the form in 'English' only.
- 2. Incomplete, illegible or inconsistent applications will be rejected.
- 3. DSC Download link is sent to the applicant email only.
- 4. The certificates must be downloaded only in a cryptographic device.
- 5. Applicants must refer to Capricornid CPS at www.certificate.digital.

- 6. Contact us at : support@certificate.digital or at +91 011 4244 8288
- The forms must be sent to : G-5, Vikas Deep Building, Plot-18, Laxmi Nagar District Centre, Delhi- 110 092, India
- for encryption certificate only
 I hereby undertake that a backup copy of the encryption key will be securely
 maintained by me.(Applicant)
- 9. Applicant has to sign across the photograph extended to application form.

Applicant Declaration

I hereby agree to abide and confirm, that I have read and understood provisions, guidelines & practices of CapricornID CPS and the subscriber agreement. The information provided in this application form is correct and true in all respect.

For Official Use Only

Please affix Partner / Re-seller / Associate Signature here. Verification Officer / Trusted Role Signature to be affixed here.

Date:

affix recent passport size photograph of the applicant

Place:

Signature of applicant as in ID Proof

applicant has to sign across the photograph extended to application form

Sid	nature
Sig	ITACATO

SIGNATURE IN BLUE INK ONLY. FORMS FILLED OTHER THAN BLUE INK SHALL BE REJECTED*

