

Ref. No
(To be Filled by NICCA/RA Office)

DIGITAL SIGNATURE CERTIFICATE REQUEST FORM

NOTE:-

1. All fields are mandatory and validity of the filled form is 90 days.
2. Please Tick **(P)** the appropriate portion & submit only Page No. 1 & 2 after filling.
3. Subscriber advised to read Certificate Practices Statement of NICCA.
4. Validity period cannot exceed the date of superannuation of applicant.
5. Asterisk (*) mark entry will be used in Certificate subject Details.
6. INCOMPLETE/INCONSISTENT FORMS WILL BE SUMMARILY REJECTED

**Paste your recent
passport size
photograph and
sign across it
(self attest)**

1. Category of Applicant : _____ [Fill code from Annexure-I]

2. Project Code : _____ [Fill code from Annexure-II]

3. Class of Certificate Required : Class-1/Class-2/Class-3 Device Required: Token/Smart Card only for signing certificate

4. Certificate Required (Usage) : Signing/Encryption/SSL/Code Signing [Separate Form for each except Signing/Encryption]

5. Certificate Validity [Max. 2 Years] : Two Years/Specify Validity [If less than 2 Years] _____

6. Date of Superannuation [DD/MM/YYYY]* : _____

7. Name* {in BLOCK LETTERS only} : _____

8. Designation : _____

9. Email-Id* (Official email-id preferred) : _____

10. Ministry/Department : _____

a) Office Address : _____

Tel. No. (O)* _____ Mobile No.* _____

b) Residential Address : _____

11. Identification Details : _____
(Attach a photocopy of the same attested by HO) [Departmental/Employment Photo ID No./Service Verification Certificate with photograph]

12. Certificate Subject Details* : Organization* _____
Organization Unit* _____
City* _____ Postal Code* _____
State* _____ Country* India

Only for PAN enabled DSC* : PAN No.* _____ [Attached a self attested photo copy of PAN card for Company Pan enabled DSC; provide a company Pan & documentary proof for holding position in the company]

13. SSL/Web Server Certificate Details : Public IP Address _____ Physical Location _____
[To be filled only for SSL certificate] URL/Domain Name _____
IP allocation organization _____

14. System Certificate Details : IP Address _____ MAC Address _____
[Any one detail required] Serial No. /Unique ID (CPU/device) _____

15. Payment Details : DD No. _____ Date _____ Bank Name _____
NICSI Project No., if any _____

Place:

Date:/...../.....

(Please do not write below this line)

[Signature of Applicant]

(For NICCA/RA Office Use Only)

REF	SCAN	UID	SC/SCR	TKN	PRN
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Req. No. (S) _____

Req. No. (E) _____

RAA Name _____ Date _____

Declaration by Subscriber

I hereby declare and understand that

1. I have read the subscriber agreement under Resource link available on NICCA A website (<https://nicca.nic.in>)
2. I shall keep the private key safe on FIPS-140 Level-2 compliant smart card/USB crypto-tokens (Signing/Code Signing Certificate) and will not share with others.
3. I shall verify the contents and the correctness of the certificate before accepting the DSC. I shall send a signed mail of NICCA. (casupport@nic.in) to acknowledge the acceptance of the DSC.
4. I shall not use the private key before acceptance of the DSC.
5. I authorize NIC-CA to publish the certificate in the NIC-CA repository after acceptance of the DSC.
6. If the private key of my DSC is compromised, I shall communicate to NICCA. Without any delay as per the requirement mentioned in Regulation of Information Technology (Certifying Authority) Regulation 2001.
7. I understand the terms and conditions of issued DSC and will use the DSC under the terms of issue as in the Certificate Practice Statement.
8. I understand that on cessation of my employment. I shall inform NICCA and my present employer for revocation of my Digital Signature Certificate.
9. I am solely responsible for the usage of these Certificates/Tokens/Technology. I shall not hold NICCA responsible for any data loss/damage arising from the usage of the same.
10. I am aware that Key Escrow/Archiving of Encryption Keys is not done by NICCA and I shall not hold NICCA responsible for approach NICCA for recovery of my private Encryption Keys, in case of its loss or otherwise. I understand that in case of loss of private key of encryption certificate, I will not be able to decrypt the data which was encrypted by corresponding public key of the encryption certificate. I would keep safely backup of p12/plz encryption key file and recover/restore the same in case its accidental or otherwise loss.
11. I shall be responsible for compliance to the relevant sections of the IT Act/Indian Telegraphic Act and other Acts/laws of the Indian legal system pertaining to Encryption/Decryption of any message or document of electronic data, and I shall be liable for associated penal actions, for any breaches thereof.
12. NICCA shall not be held responsible and no legal proceeding shall be taken against NICCA for any loss and change that may occur due to any reason whatsoever including technology upgradation, malfunctioning or partial functioning of the software, USB Token/Smart Card or any other system.
13. I am aware that the Certificate, issued by NICCA is valid only for the intended usage and for the period mentioned in the certificate. I undertake not to use the Certificate for any other purpose.
14. I am conversant with PKI technology, and understand the underlying risks and obligations involved in usage of Encryption Certificate/DSC.
15. For SSL System Certificate, I undertake that I have checked the existence of IP/URL/domain name and physical location of the server.
16. For System Certificate, I undertake that MAC/Serial No./IP No. are correct and are in my custody.
17. For Class-3, certificate I shall appear in person at NICCA/RA/Physical Appearance Centre (PAC) any of the NIC Centres, State Units/District Centres/Cells at various Ministry Cell of NIC along-with a photograph and department photo-Id card for verification and submit a photo copy of the same.
18. I certify the following. (Tick whichever is applicable)
 - I have not applied for a DSC with NIC-CA earlier
 - I have been issued a DSC by NICCA with User-Id _____ which is Valid/Revoked/Suspended/Expired.

The information furnished above is true to the best of my knowledge and belief. I will comply with the terms and conditions of Subscriber (as in section 40-1 of the IT Act 2000) and those of the Certificate Practice Statement of the NIC-CA. If at a later stage any information is found to be incorrect or there is non-compliance of the terms and conditions of use of the DSC, NIC-CA will not be responsible for the consequence/liabilities and will be free to take any action including cancellation of the DSC.

Date:/...../.....

Place:

[Signature of Applicant]

Verification and/or Declaration by Head of Office of Applicant for issuance of DSC

1. This is to certify that Mr./Ms. _____ has provided correct information in the Application form for issue of Digital Signature Certificate for Subscriber to the best of my knowledge and belief.
2. I have verified the credentials of the applicant as per the official records/I have not verification letter from the companies/vendors for the contractual employees from where they have been hired/outsourced, as per the guidelines given at Page 4.
3. I certify that contractual employee Mr./Ms. _____ is working in project _____ at _____. His/her contract is valid from _____ to _____.
4. I hereby authorize him/her or behalf of my organization to apply for obtaining DSC NICCA for the purpose as in DSC.
5. In case of issuance of encryption certificate, it is further certified that a Policy/procedure is in place, which describes the complete process for Encrypted Key Pair Generation, Backup Procedure, safe-Keeping of Backups and associated Key Recovery procedures. The consequences of loss of the key have explained to the user and he/she has been advised about securing the key and making it available to relevant authorities, in case of emergency. I shall not approach NICCA for recovery of private Encryption Key, in case of its loss or otherwise.
6. For SSL server certificate, I have verified the existence of URL/IP, the allocation organization and physical location of web server.
7. For System Certificate, I have verified the MAC/Serial/IP no of the system/device.
8. It is noted that the organization shall inform NICCA for revocation of DSC on the cessation/Superannuation of his/her employment.
9. I have attested applicant's photograph and department/employment photo-Id of the applicant.

Date:/...../.....

Place:

[Signature of Officer with Office Seal with name and designation]

Note: Contractual employees will be issued certificate with maximal validity of one year

Checklist to be ticked (P) by NIC Coordinator before forwarding to NIC RA/CA Office

- | | |
|--------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| <input type="checkbox"/> All asterisk (*) marked entries are filled | <input type="checkbox"/> Payment details filled & DD attached (if required) |
| <input type="checkbox"/> Attested & self signed copy of Department photo-id attached | <input type="checkbox"/> Attested & self signed copy of PAN card attached, if any |
| <input type="checkbox"/> Signature of Applicant done | <input type="checkbox"/> Verification by Head of Office (HO) with Signature & Official Seal |
| <input type="checkbox"/> In person verification is done for Class-3 applicant as attached Annexure-III | |

Email Mobile No. [Signature of NIC Coordinator with name and designation/Office Seal]

[This Form is to be forwarded to the response RA/CA Office of NICCA]

Physical Appearance Verification Details

(To be filled by NIC Verifying Officer for Class-3 DSC applicant)

- ü In-person verification of Shri/Smt/Ms Class-3 DSC applicant has been carried out on (dd/mm/yyyy) at (hh:mm).
- ü He / She has shown his/her departmental-id bearing No.
- ü His/her signature & photograph have been matched with signature & photograph available on his/her departmental-id card as well as DSC application form.
- ü His/her signature & photograph have been attested by the undersigned as shown below.
- ü His/her mobile No. is
- ü His/her self attested photocopy of departmental-id card is attached herewith.

Paste passport size latest photograph of Applicant (for class-3 certificate only) Attested by NIC Verifying Officer

Applicant's Signature (to be signed in the presence of verifying officer)
.....

Attested/verified by:-

Signature of NIC Verifying Officer:

Name/Designation/Emp. Code

Official Seal/Stamp:

Email:

Telephone/Mob No.:

NIC Centre/Location:

[For Class-3 certificate only – This Annexure is to be attached with DSC form & forwarded to the respective NICCA/RA Office]