

# Class 2

## Individual Certificate

### Registration Form for Class 2 Digital Certificate

Customer identification Number : \_\_\_\_\_ (for office use only)

Validity 1 year  2 year  Type Only signing  Sign & Encrypt

Applicant Name		
Surname	First Name	Middle name
Email ID	Date of Birth	
	<input style="width: 15px; height: 15px;" type="text"/> <input style="width: 15px; height: 15px;" type="text"/> <input style="width: 15px; height: 15px;" type="text"/> <input style="width: 15px; height: 15px;" type="text"/> <input style="width: 15px; height: 15px;" type="text"/> <input style="width: 15px; height: 15px;" type="text"/> <input style="width: 15px; height: 15px;" type="text"/> <input style="width: 15px; height: 15px;" type="text"/>	

**Affix recent  
passport  
size photograph  
of applicant**

**Applicant to sign across  
the photograph extended  
to application form**

Residential Address	
(As mentioned in attached supporting)	

Town/City/District		State/Union Territory	
PIN	Contact No		MO
Identity Detail of Applicant			

\*PAN Card   
  Post office ID Card   
  Driving License   
  Passport   
  Govt. ID Card   
  Copy of Bank Account Passbook containing photo & signed by applicant with attestation by concerned Bank officer

\* For PAN based DSC please provide the PAN Card Details and enclose the copy of same

I hereby agree that I have read and understood (n) Code Solutions CA CPS and the subscribe agreement and promise to abide the same I have read and understood guidelines for storage of private keys mentioned in (n) Code Solutions CPS and risk involved by using other storage devices to store private keys. I shall be held responsible for all risks arising out of not using USB Crypt tokens to store private Key.

<b>DETAILS REQUIRED IF APPLICANT IS FOREIGN NATIONAL</b>	Nationality
Visa Details	Passport No.

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| <ol style="list-style-type: none"> <li>1. Please fill the form in English only legible format</li> <li>2. The details are required to obtain Class 2 individual Certificate and will bear Object Identification as 2.16.326.100.2.2</li> <li>3. Increase key pair has been compromised/lost/defeated, please apply for revocation of certificate.</li> <li>4. Incomplete application is labeler for Rejection.</li> <li>5. Please refer to the CPS for more information</li> </ol> | <ol style="list-style-type: none"> <li>6. All supporting should be attested by Gazetted officer Bank manager or Post Master. Alternatively the applicant can present against to LRA for verification and attestation.</li> <li>7. The validity of address proof in case of utility bills shall not be older than 3 months from the date of application</li> <li>8. For any assistance Please get in touch with us at <a href="mailto:dssupport@nccode.in">dssupport@nccode.in</a> or call 1800-233-1010</li> </ol> |
|--|--|

Date

Place

Verified by (n) Code office

All Document Checked & Verified by  
Seal & Signature

Signature of Applicant

For LRA use only

All Document Checked & Verified by  
LRA Name. Seal & Signature