

APPLICATION FORM - SIGNATURE / ENCRYPTION CERTIFICATE

FOR GOVERNMENT ORGANIZATION



Application ID: (S) 8 0 1 7 8 0 9 (E)

(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	ATUL BANSAL																				
Date of Birth	0	4	0	7	1	9	9	3	Gender	☒ Male ☐ Female	Nationality	I	N	D	I	A	N				
Organisation Name	Municipal Corporation Raipur																				
Department	Urban Administration and Development																				
Org Address	S/O ASHOK BANSAL, WARD NO. 9, VIJAY H.P. GAS AGENCY, JANJGIR, JANJGIR-CHAMPA. (C.G.) 495668																				
City	RAIPUR					Pin code	4	9	2	0	0	1									
State	CHATTISGARH																				
PAN of Applicant	B	L	H	P	B	6	5	5	4	P	Mobile	9	6	9	1	5	5	3	5	4	6
IEC Code											Branch Code				(NOTE : applicable only for dgft certificate)						
Email ID	ATULBANSAL32@GMAIL.COM																				

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

CLASS:

☐ Class 1 ☒ Class 2 ☐ Class 3

TYPE:

☒ Signature ☐ Encryption ☐ Combo

VALIDITY:

☐ 1 Year ☒ 2 Years ☐ 3 Years

DOCUMENT PROOF (attested by Authorized Signatory of the Organization)

Document required:

- ☒ Copy of Applicant's Government ID Card / Letter from Organization / Pay Slip
- ☒ Authorized Signatory Organisational ID Card / Self-Attested Letter of Organizational Identity
- ☐ Copy of PAN Card of Applicant, if PAN provided
- ☐ Copy of Import Export Certificat (NOTE : Mandatory only for DGFT)

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 am aware of risks associated in case of Class 1 Certificate, when storing the private key on a device other than a FIPS 140-1/2 validated cryptographic module.

Date

Place

 Signature of the applicant
(As in ID proof | Blue Ink Only)

AUTHORIZATION

I hereby authorize this application on behalf of the organization. I hereby confirm the mobile number of Applicant given above. In case of class 3, I confirm the Physical Verification of Applicant.

Authorized Signatory (Sign and Seal)

TO BE FILLED BY RA OFFICE ONLY

I declare that the applicant has provided correct information in this application form. I have checked and verified the application form and supporting documents. I hereby take full responsibility for any wrong verification made, or wrong documents submitted for the application.

Date

RA Name, Code & Seal

Signature of RA