

For official use only

RCAI Class 3 - Digital Signature Certificate (DSC) Application

(for individuals with organization name)

Instructions for filling in the application form:

PIN Code *

1. This form is to be filled b	y the individual for whom the DSC is intended.	
	Partner Code rm is complete in all respects. If you require assistance,	
	orized Safescrypt representative.	
3. Incomplete forms would fill in all fields unless ma	delay the certificate issuance process. Therefore, please rked "optional".	
4. Use only BLOCK LETTERS to fill the form. Check all boxes wherever applicable CD Serial No.		
5. You are urged to review o		
6. Detailed instructions for certificate issuance will be provided by our authorized Safescrypt representative.		
	DSC Issued on	
Section: 1		* Indicates mandatory field
Certificate Validity * (Tick as applicable) 1 Year 2 Years		
Applicant details :		,
First Name *		
Middle Name		Self
Last Name *		Attested Photo
Date of Birth *		
Gender *	: Male Female	<u> </u>
Organisation Name *		
Residential Address		
Door No/Building Name *		
Road/ Street/ Post Office *		
Town/ City/ District *		
State/ Union Territory *		

Telephone Number *			
Mobile Number*			
Section 2: Kindly provide your valid email address. The digital certificate will be sent to this email id and the same id has to be used while enrolling online*			
Section 3a: Identity Proof Details Please provide details of a governme	nt-issued photo identity proof being enclosed by you		
Acceptable photo IDs are passport / PAN card / driver's license			
The photocopy of the specified photo-ID is required to be duly attested by your banker/gazette officer/Notary			
Identity Proof Submitted *			
passport PAN card driv	er's license		
Identity Proof Number *			
Section 3b: Address Proof Details of Applicant			
 Please specify the Address Proof Documents that you will be submitting along with this application. passport voter ID card driver's license / Others 			
 The address proof of the specified applicant is required to be duly attested by your banker/gazatted officer or Notary. 			
Declaration:			
According to the Indian IT Act 2000 Part-II Section-I CHAPTER VIII states that every subscriber shall exercise reasonable care to retain control of the private key corresponding to the public key listed in his Digital Signature Certificate and take all steps to prevent its disclosure.			
I hereby declare that all information provided on this Certificate Application Form for the purpose of obtaining a digital certificate is true and correct to the best of my knowledge.			
Signature of the Applicant *	:		
Date *			
Place *			
	For official use only		
Section 4: Attestation by Sify authorised LRA / partner			
I hereby declare that the above applicant has present himself to me and submitted the original document copies of ID proof and I have verified the same as TRUE COPY.			
Signature & Seal *	:		
Date *			
Name *			

Sify, at its discretion, will make a telephone call to verify the details of this attested Signature of the Applicant to be signed before the Sify authorised LRA / partner