

Registration Form for Digital Certificate [Individual]

Customer Identification Number: _____ (For office Use Only)



Instructions:

1. Please fill the forms in Capital letters in English only
2. (n)21 refers to Class – II- Individual
3. Any discrepancy/inconsistency in the form will lead to delay and/or rejection
4. Submit the application to nearest LRA. Please visit www.ncodesolutions.com for same

Affix recent passport size photograph of the applicant

Applicant to sign across the photograph extended to application form

Certificate Validity

1 Year

2 Years

Profession

 Director

 CA

 CS

 ICWA

 Financial Institution

 Partner

 Others

Professional ID (For CA/CS/ICWA)

Name of the Applicant (As required in the Digital Certificate)

Please ensure that the name as it appears in the identity proof matches with the name mentioned below

Residential Address

Town/City/District

State/PIN

Country

Telephone No./ Mobile

E-mail Address

Date of Birth

D D M M Y Y Y Y

PAN No

Identity Details

No :

Passport // Driving License // Voters ID // PAN // PF AC. // Ration Card No //

Details Required If Applicant is Foreign National

Nationality

Passport No.

Visa Details

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Checklist of the Documents to be Submitted with Application

A. Attested* copy of any one : (Please tick the one submitted)

Passport Driving License Voters ID PAN Card PF Statement Ration Card

B. Attested* copy as address proof of any one : (Please tick the one submitted)

Latest Telephone Bill Electricity Bill LIC Policy Receipt
 Documentary Proof of Professional Membership (For CA/CS/ICWA)

C. Only for Directors / Partners

Declaration giving Director/Partner details duly attested by CA/CS as per format given below.

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

Date :

Place :

Signature of Applicant

Cheque /DD to be drawn in favor of MCS DIGISIGN SOLUTIONS, payable at Ahmedabad

Payment Details

DD / Cheque No : _____
Date : _____ Amount : _____
Bank Name : _____

LRA Details

Checked & Verified by : _____
LRA Name / Stamp

support@ncodesolutions.com

Declaration (Applicable for Directors /Partners)

To,
(n)Code Solutions – A Division of GNFC Ltd

This is to certify that Mr./Ms. _____ (certificate applicant) is a bonafide
Director / Partner of _____ (organization name)

Details of Attesting Authority

Profession	
Professional Membership No	
Date	
Place	

Signature with Stamp/Seal

Ahmedabad
Corporate Office

(n) Care...

079-4000 7300

Mumbai

022-22048908

Delhi

011-26534238

Bangalore

080-25272525

Chandigarh

0172-2707732

marketing@ncodesolutions.com