





State/Union Territory

Pin

Telephone No.  --   
Area Code Telephone No.

Fax  --   
Area Code Fax No.

Web Page URL, if any

**APPLICANT'S (AUTHORISED SIGNATORY) PERSONAL DETAILS: \* (Mandatory)**

**FULL NAME \***  
Last Name/Surname

First Name

Middle Name

**GENDER** \*(Tick as applicable)

Male

Female

**DATE OF BIRTH (DD/MM/YYYY) \***  /  /

**CONTACT ADDRESS**

Flat/Door/Block No.

Name of Premises/  
Building/Village

Road/Street/Post Office

Area/Locality/Taluka  
Sub-Division

Town/City/District

State/Union Territory



|  |  |
|--|--|
| Pin  | <input type="text"/>                         |
| Telephone No.  | <input type="text"/> -- <input type="text"/> |
|  | Area Code Telephone No.                      |
|  | Extension No. <input type="text"/>           |
| Mobile No.   | <input type="text"/>                         |
| <b><u>Important Note:</u> RA office will contact using the contact numbers provided above.</b> |  |
| Fax No.  | <input type="text"/> -- <input type="text"/> |
|  | Area Code Fax No.                            |
| Nationality  | <input type="text"/>                         |
| <b>Visa details, in case of Foreign Nationals</b>  |  |
| <input type="text"/>   |  |

**Details for at least one is mandatory**

|   |                      |
|---|----------------------|
| <b><u>PASSPORT DETAILS #</u></b>          | <input type="text"/> |
| Passport No.                              |                      |
| Passport Issuing Authority                | <input type="text"/> |
| Passport Expiry Date (DD/MM/YYYY)         | <input type="text"/> |
| <b><u>VOTER'S IDENTITY CARD NO. #</u></b> | <input type="text"/> |
| <b><u>INCOME TAX PAN NO. #</u></b>        | <input type="text"/> |

**E-MAIL ADDRESS \* (Mandatory - a valid and active email ID that is accessed frequently)**



**ANY OTHER DETAILS**

Date

Signature of the Applicant

**TO BE FILLED BY RA OFFICE**

The above details have been verified and found to be correct.

**TYPE OF DIGITAL CERTIFICATE REQUIRED:**

Signing Certificate (Single Key pair) - *This can be used for signing and/or encryption*

Signature of RA Office

Name:

Date:

Seal:





***The certificate Request Form and the Document Checklist along with all the supporting documents have to be forwarded to the RA Office at the following address:***

**Duly mark the envelope as 'APPLICATION FOR DIGITAL CERTIFICATE'**

**Vyapar Suvidha Pvt. Ltd.**

**Address:**

12/2, Old Post Office Street,  
3rd Floor (Near Kolkata High Court),  
Kolkata-700001.

**Mr. Vishal Agrawal**

Ph: 033 - 22487606

Fax: 033 - 22485350

Mobile: 09831187874

E-mail: esoft\_1@sify.com

**Mr. Nagesh Chakraborty**

Ph: 033 - 22487606

Fax: 033 - 22485350

Mobile: 09830190889

E-mail: esoft\_1@sify.com



### **Instructions**

1. The certificate shall be downloaded onto the same computer / Hardware device (USB token, Smart Card etc.) by login as same computer user account from where the request was initiated.
2. After placing an online request for a certificate, the following activities **shall not** be carried out until the certificate is successfully downloaded:
  - Formatting of the computer
  - Deletion of computer user account used to logon when the request was initiated
  - Reinstallation or upgrade of the Internet browser on the computer from which the certificate request was initiated.
3. At the time of registration, a valid and active email ID that is accessed frequently shall be provided.
4. The certificate must not be shared with others or used by them on your behalf.
5. If you lose your key pair, you shall inform the RA Administrator immediately and apply for the revocation of your certificate.
6. Certificate revocation is permanent and irreversible. If your certificate is revoked, you will have to reapply for a fresh certificate. The same will be approved only after the payment of necessary applicable charges.
7. The security level in the Internet Browser should be set to 'Medium' and all scripting should be enabled.
8. If your role changes and you are no longer the authorized signatory of the organization, you must contact your RA Administrator immediately and apply for the revocation of your certificate.
9. If any information provided in your certificate changes, then you shall revoke the existing certificate and apply for a new certificate. The same will be approved only after the payment of necessary applicable charges.

### **Declaration**

**I hereby confirm that I have read and understood the above instructions and will follow the above instructions for obtaining and using the Digital Signature Certificate.**

Date

Place

Signature of the Applicant