APPLICATION FORM - DOCUMENT SIGNER CERTIFICATE					(\mathbf{O})	en	1UC	Ihra	
CLASS 3						Trus	t Del	ivered	
Application ID: (For Office	e Use Only)							
PLEASE FILL IN BLOCK LETTERS ONLY. ALL FIELDS ARE N		Y							
More Instructions available at: http://www.e-mudhra.com/instruction.html									
APPLICANT INFORMATION					Affix recent passport size photograph of the applicant <u>duly</u> <u>signed across</u>				
5 dd`]WUbh Name									
Designation:									
Date of Birth D M Y Y Gender Male Female Mobile									
Email ID:									
ORGANISATION INFORMATION						Туре:			
Organisation Name:					✓ Document Signer VALIDITY: □ 1 Year □ 2 Years □ 3 Years				
Department:									
Address:									
						Class 3 Certificate:			
						stand that C nd be stored		icate should	
City: State:					Hardware Security Module (HSM). We declare and assure that the CSR is originated by the key-pair generated in our HSM, and we confirm				
Pin code: Country:						certify thos .cer).			
DOCUMENT PROOF (attested by Authorized Signatory of the Organiz	zation)								
Organization Type: Goverment Bank Company Partners	ship Prop	rietorsh		BOI 🗆 LLP 🛛	NGO/TRUS	т			
Document Name	Goverment	Pank	Company	Partnership Pr	roprietorship		LLP	NGO/Trust	
Copy of Applicant's Organizational ID Card / Letter from Organization	Goverment ✓							√	
Copy of Organizational PAN Card	·	~	~	~		~	~	~	
Copy of Bank Statement (First 2 Pages)			~	~	~	~	~	~	
Copy of Incorporation/Registration Certificate			~			~	~	~	
Copy of AOA & MOA / Rules / Bye laws (First 2 Pages)			~			~	~	~	
Copy of Last Income Tax Return / Audit Report & Annual Return / Self Affidavit with reason, if not available (First 2 Pages)			~	~	~	~	~	~	
Copy of Partnership Deed / Trust Deed / LLP Agreement containing the List of Partners / Signatories (2 Pages)				~			~	~	
Copy of Business Registration Certificate (S&E / ST / VAT / Any other Government Registration)					\checkmark				
Proof of Authorized Signatory (Board Resolution)			~			~	~	~	
Authorized Signatory Organizational ID Card / Self-Attested Letter of Organizational Identity	~	~							
DECLARATION BY APPLICANT		Aut	horized	Signatory	of Applica	ant's Oi	ganiza	tion	
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 hereby declare and understand that Organizational Document Signer Certificate issued to us will be used only for automated signing of documents / information and will not be used in any other context including individual signature. I hereby declare that necessary controls have been built in software applications to ensure that there is no misuse. I hereby declare and understand that the documents/messages authenticated using Organisational Document Signer Certificate issued to us is having organisational accountability.		I hereby authorize this application on behalf of the organization. I hereby confirm the mobile of Applicant given above. I also confirm the Physical Verification of Applicant. Name: Designation: Telephone: Email:							
ce: Signature of the applicant			Authorized Signatory (Sign and Seal)						

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