

RCAI Class 3 - Digital Signature Certificate (DSC) Application

(for individuals)

Instructions for filling in the application form:			ficial use only
1.	This form is to be filled by	the individual for whom the DSC is intended. Partner Code	
2.		rm is complete in all respects. If you require assistance, prized Safescrypt representative.	
3.	Incomplete forms would of fill in all fields unless man	delay the certificate issuance process. Therefore, please ked "optional".	
4.	Use only BLOCK LETTERS to fill the form. Check all boxes wherever applicable CD Serial No.		
5.	You are urged to review our CPS while applying for a certificate.		
6.	Detailed instructions for certificate issuance will be provided by our authorized Safescrypt representative.		
		DSC Issued on	
Sec	ction: 1		* Indicates mandatory fiel
Certificate Validity * (Tick as applicable) 1 Year 2 Years			
Ар	plicant details :		
Firs	st Name *		
Mid	ddle Name		Self
Las	t Name *		Attested Photo
Da	te of Birth *		
Gender *		: Male Female	<u> </u>
Res	sidential Address		
Door No/Building Name *			
Road/ Street/ Post Office *			
Tov	wn/ City/ District *		
State/ Union Territory *			
PIN Code *			

Telephone Number *

Mobile Number*

Section 2: Kindly provide your valid email address. enrolling online*	. The digital certificate will be sent to this email id and the same id has to be used while				
Section 3a: Identity Proof Details Please provide details of a government-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 *	iver's license				
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 * Section 4: Attestation by Sify authorise	For official use only				
_	licant has present himself to me and submitted the original document copies of ID proof and I have				
Signature & Seal * Date *	: : DDDMMMYYYY				
Name *					

Safescrypt CA Services brought to you by:

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