APPLICATION FORM - SIGNATURE / ENCRYPTION	CERTIFI	CATE		6	en	11	dhra			
FOR ORGANISATION				5	Trus		livere			
Application ID: (S)				(For Office Use Only)						
PLEASE FILL IN BLOCK LETTERS ONLY. ALL FIELDS ARE MANDATO	RY									
More Instructions available at: http://www.e-mudhra.com/instruction.html										
APPLICANT INFORMATION										
i dd`]WUbh Name				Affix recent passport size photograph of						
Date of Birth D D M M Y Y Y Y Gender Male Female Nationali	Birth D D M Y Y Gender Male Female Nationality						the applicant <u>duly</u> signed across			
Organisation Name										
Department										
Drg Address				CLASS						
				Class	-	ass 2	Class 3			
City	Pin code			TYPE:						
State										
				Signa	ature Er	icryptio	n Combo			
AN of Applicant Mobile				VALIDI	TY:					
Aadhaar (NOTE : Either PAN an	(NOTE : Either PAN and / or Aadhaar No. is mandatory)									
Email ID										
OCCUMENT PROOF (attested by <u>Authorized Signatory</u> of the Organization) Organization Type: Company Partnership Proprietorship AOP/BOI	LLP N	IGO/TRUST								
Document Name	Company	Partnersh		ietorship			NGO/Trust			
Copy of Applicant's Organizational ID Card / Letter from Organization / Pay Slip	~	~		~	~	 ✓ 	✓			
Copy of Organizational PAN Card	~	~			~	 ✓ 	<u> </u>			
Copy of Bank Statement (First 2 Pages)	~	~		~	~	 ✓ 	✓			
Copy of Incorporation/Registration Certificate Copy of AOA & MOA / Rules / Bye laws (First 2 Pages)	✓ ✓		_		✓ ✓	~	<u> </u>			
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 / GST / Any other Government Registration)				~						
Proof of Authorized Signatory (Board Resolution)	~				~	~	~			
	\checkmark	~		~	~	~	~			
Authorized Signatory Organizational ID Card / Self-Attested Letter of Organizational Identity	~									
Authorized Signatory Organizational ID Card / Self-Attested Letter of Organizational Identity Copy of PAN Card / Aadhaar Card of Applicant, either one is Mandatory	*	*		*	*	*	*			
Copy of PAN Card / Aadhaar Card of Applicant, either one is Mandatory DECLARATION BY APPLICANT hereby agree that I have read and understood the provisions of e-Mudhra Certification Prand the subscriber agreement and will abide by the same. The information provided in this he best of my knowledge. I accept publishing my certificate information in e-Mudhra repositor associated in case of Class 1 Certificate, when storing the private key on a device other than a cryptographic module. Date	* actice Stateme form is true & ory. I am awa	ent (CPS) correct to re of risks validated	hereby aut Drganisation Encryption (the Identity (Authorized to certify the	n to apply fo Certificate is of the above Signatory). de Identity on	ON bove applicator obtaining the	ne Digita udhra h nd My ic prized P Organiz	I Signature/ ereby confirm entity ersonnel to			
Copy of PAN Card / Aadhaar Card of Applicant, either one is Mandatory	* actice Stateme form is true & ry. I am awa FIPS 140-1/2 ure of the ap	ent (CPS) correct to re of risks validated	hereby aut Drganisation Encryption (the Identity (Authorized to certify the	horize the a n to apply fo Certificate is of the above Signatory). a Identity on	ON above applica or obtaining th ssued by e-M e Individual a I'm the Auth behalf of the	ne Digita udhra h nd My ic prized P Organiz	l Signature ereby cont lentity ersonnel to			

		RA Name, Code & Seal	Signature of RA
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Date

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