This form is applicable to officers of Central Government / State Government / PSUs / Autonomous body of Central Government /

Please select Certificate type

TIP: Please se	lect class o	f certificate and	validity.
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Class 2 3	Year	1 2 3		Type Sig	ning	Sign & Encry	ypt		For	m ID	
Please complete the applic											
APPLICANT	First Name			Middle Name	e		Last N	lame			Designation
E-mail ID											Mobile No.
Please complete organizat TIP: Please tell us about your organization.	ion details										
Organization Name											
Department						Branch					
Organization Address											
Town/City				State				PI	N/ZIP		
Documents Required	:										
Applicant's Identity Card	or Proof of individ	duals association w	ith organisati	ion.							
Authorization letter forwar	ded / Certified by	y Department / Hea	ad of Office /	Coordinator mer	ntioning	Mobile number and eN	Mail address of the	e applican	t.		
Identity card of authorised	signatory or pro	of of authorised siç	gnatory's ass	ociation with org	anisatio	n.					
For Class 3 DSC, Departr	nent should certi	fy the physical veri	ification of ap	plicant.							
Instructions:											
Please fill up the form in 'Engli Incomplete, illegible or inconsi		s will be rejected				7. Contact us at : 9 8. The forms must					
3. Mobile verification by the appl 4. DSC Download link is sent to the sent t	cant is mandator	ry.				Delhi-110 092, 9. for encryption of	India.				

- 5. The certificates must be downloaded only in a cryptographic device.
- 6. Applicants must refer to Capricornid CPS at www.certificate.digital.

- maintained by us.
- 10. Applicant to sign across the photograph extended to application form.

Note: Section 71 of IT Act stipulates that if anyone makes a misrepresentation or suppresses any material fact from the CCA or CA for obtaining any DSC such person shall be liable for punishment with imprisonment up to 2 years or with fine up to one lakh rupees or both.

Applicant Declaration

I hereby agree to abide and confirm, that I have read and understood provisions, guidelines & practices of Certificate.Digital CPS and the subscriber agreement. The information provided in this application form is correct and true in all respect.

affix recent passport size photograph of the applicant

applicant to sign across the photograph extended to application form

Date:

Place:

Signature of applicant

For Official Use Only

Please affix Partner / Re-seller / Associate Signature here Verification Officer / Trusted Role Signature to be affixed here

