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TATA CONSULTANCY SERVICES
Experience certainty.

CERTIFYING AUTHORITY
Recognized by the controller of Certifying Authorities

TATA CONSULTANCY SERVICES LIMITED – CERTIFYING AUTHORITY
REQUEST FORM FOR CLASS 2 CERTIFICATE
INSTRUCTIONS

Affix recent passport-size photograph of the applicant. Applicant to sign across the photograph

USER TYPE – COMPANY

Validity of DSC*

☐	Empower India DSC	☐	1 year
☐	2 Years		

E-Mail Address*^

Alternative E-Mail Address

Corporate / Branch / Registered office - Organisation Details

Name*^

House Identifier*^

Street Address*^

City*^ Pin Code*^

Country*^ State*^

Telephone* Mobile

FAX

PAN*

Applicant Details

Gender* ○ Male ○ Female

Surname^ Given Name*^

Father/Husband's Name Initials^

House Identifier*

Street Address*

City* Pin Code*

Country* State*

Telephone* Mobile

Nationality*

DOCUMENT CHECKLIST FOR COMPANY TYPE OF CERTIFICATE

Corporate / Branch / Registered office (any one ATTESTED copy required)

☐ Public & Private limited

☐	Certificate of incorporation		☐	Business commencement	
☐	Memorandum and articles		☐	Latest annual report.	

☐ Partnership Firms

☐	Partnership deed	

☐ Proprietorship firms

☐	Latest bank statement		☐	Latest income tax return	
☐	Latest balance sheet		☐	Sales tax certificate	
☐	Business commencement licence				

Subscriber proof of identity and residence(ATTESTED copy required)

☐ Identity and Residence

☐	Passport		☐	Driving License	

☐ Identity

☐	PAN Card		☐	Passport	
☐	Driving License		☐	Bank A/C Passbook with Photo	
☐	Photo Identity Card				

☐ Residence

☐	Latest Telephone Bill		☐	Latest Electricity Bill	
☐	Latest Bank Statement		☐	Passport	
☐	Driving License				

☐ Letter of Authority* Letter of Authority

Annexure A - Letter of Authority

I, _____ in the capacity of the _____ of _____, authorize _____, whose signature is attested below to carry out all the necessary formalities on behalf of _____ for the application of a Class-3/Class-2 Digital Signature Certificate with the validity period of _____ year(s).(required validity period needs to be mentioned)

_____
Signature and Designation
of Authorizing Person

_____
Signature and Designation
of the Applicant

Note: Guidelines on how to fill the Letter Of Authority based on type of organization.

1. Public & Private Limited Companies: The applicant of the certificate has to get himself authorized by the superior to whom he/she reports in the said company. If the applicant himself is the head of the organization, he can authorize himself.
2. Partnership Firms: The partner who is the applicant of the certificate has to get himself authorized by the other partner of the said partnership firm.
3. Proprietorship Firms: The proprietor who is the applicant of the certificate has to self authorize as he is the whole & sole responsible of the proprietary concern.

Applicant Declaration	**RA 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	I hereby confirm that I have received and verified the documents submitted by the subscriber. Date: Place: Signature of the RA Officer

RA OFFICE NAME : _____ / **USER ID :** _____ / **REQUEST NUMBER :** _____

The certificate Request Form, Online Enrollment Form, Demand Draft and the supporting documents as per the document checklist have to be forwarded to the following address:

Duly mark the envelope as 'APPLICATION FOR DIGITAL CERTIFICATE'

RA Office

_____
_____
_____