

Enrollment Request No:
Used ID:

TATA CONSULTANCY SERVICES



TATA CONSULTANCY SERVICES LIMITED – CERTIFYING AUTHORITY SADHVI DIGITAL SOLUTIONS. – FACILITATION CENTER REQUEST FORM FOR CLASS-2 CERTIFICATE – User Type - Company

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

Instructions: Items marked with * are mandatory.

Validity of DSC * 6 Months 1 Years 2 Years

E mail Address *

* (Mandatory - a valid and active email ID that is accessed frequently)

Organization Details *

City* State* PIN Code*
Country* Ph. NO* Mobile No*
PAN

Applicant Details

GENDER * Male Female

Name * (Full Name)

Residential Address *

City* State* PIN Code*
Country* Ph. NO* Mobile No*

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

Public & Private Limited

<input type="checkbox"/>	Certificate of incorporation	<input type="checkbox"/>	<input type="checkbox"/>	Business commencement	<input type="checkbox"/>
<input type="checkbox"/>	Memorandum and articles	<input type="checkbox"/>	<input type="checkbox"/>	Latest annual report.	<input type="checkbox"/>

Partnership Firms

<input type="checkbox"/>	Partnership deed	<input type="checkbox"/>
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Proprietorship firms

<input type="checkbox"/>	Latest bank statement	<input type="checkbox"/>	<input type="checkbox"/>	Latest income tax return	<input type="checkbox"/>
<input type="checkbox"/>	Latest balance sheet	<input type="checkbox"/>	<input type="checkbox"/>	Sales tax certificate	<input type="checkbox"/>
<input type="checkbox"/>	Business commencement license	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

SADHVI DIGITAL SOLUTIONS

10, Dhanalakshmi Complex, near Sangeeth Mahal, Subramaniapuram, Trichy – 620020
Ph: 0431 – 3204292 / Mobile: 9600026062 / 9043164054

Applicant Doc Check List * (Attested Copies of following docs must be provided to TCS-CA for ID & Add Proof)

Identity and Residence

Passport		Driving License	
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Identity

PAN Card		Driving License	
Bank Passbook with Photo		Passport	
ID Card Issued by Govt.			

Residence

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

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

Instructions

- All subscribers are advised to read Certificate Practice Statement of CA.
- The Certificate shall be downloaded onto same Computer/ Hardware which used during Enrollment.
- The Certificate must not be shared with others or used by them on your behalf.
- If you loose Key Pair, you shall inform RA Administrator and apply for Revocation of Certificate.
- After placing the online request following things should not be carried out until successful installation of Certificate a) Formatting of Computer b) Deletion of User Account c) Up gradation of IE or Windows OS
- Application form must be submitted in person, incomplete forms are liable to reject.

<p>Applicant 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.</p> <p>Date: _____ Place: _____ Signature of Applicant</p>	<p>RA Declaration I hereby confirm that I have received and verified the documents submitted by the subscriber.</p> <p>Date: _____ Place: _____ Signature of RA Office</p>
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