

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

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The information provided above in the Request Form for procuring a DSC from TCS-CA is true and correct to the best of my knowledge.

Date

Signature of the Applicant

Annexure-A: Letter of Authority

This is to certify that. Mr./Ms./Mrs with
the residence at.....
.....
.....

(Residential Address) is maintaining a bank account (A/c NO.....)
with our bank.....(Bank Name)
and operation that account in the normal course of its business/activities. His/Her signature as
appearing below is duly attested (as per the records available with bank).

Signature of Authorized Signatory

Signature of Branch Manager.

Name:

Name:

Designation:.....

Designation:.....

Date:

(Bank Seal)

Annexure-B: Letter of Authority

To,

Tata Consultancy Services – Certifying Authority

Tata Consultancy Services Limited

Hyderabad

This is to certify that Mr. / Ms. _____ (Director's name) is a
bonafide Director of _____
(organization name)

Details of Attesting Authority (Company secretary)

Name _____

Profession _____

Professional Membership No _____

Date _____

Place _____

Signature with Stamp/Seal

CHECKLIST FOR INDIVIDUAL TYPE OF CERTIFICATE

The following is a list of the supporting documents that you need to submit along with the Certificate Request Form.

NOTE: NOTARIZATION TO BE DONE BY NOTARY PUBLIC OF RESPECTIVE COUNTRY.

| Sr. No. | Required Documents (Photo copies) | Document submitted | Documents verified by RA |
|---------|--|---|---|
| 1(a) | <p><u>IN CASE OF FOREIGN DIRECTOR/FOREIGN CITIZEN RESIDING IN INDIA</u> (Any one or more copies duly NOTARIZED BY <u>NOTARY PUBLIC</u> of the respective country, where the Director is resident of)</p> <p><u>Photo Identification Proof:</u></p> <p>Passport with VISA details <input type="checkbox"/></p> <p>Driving License <input type="checkbox"/></p> <p>Social Security Number <input type="checkbox"/></p> <p>Citizen Card <input type="checkbox"/></p> <p>PAN or Equivalent Tax Card of the respective country, where the Director is Citizen of. <input type="checkbox"/></p> <p><u>Residence Proof:</u></p> <p>Lease agreement/Property Documents <input type="checkbox"/></p> <p>Telephone Bill <input type="checkbox"/></p> <p>Electricity Bill <input type="checkbox"/></p> <p>Driving License. <input type="checkbox"/></p> | | |
| 1(b) | <p><u>IN CASE OF INDIAN CITIZEN/INDIAN DIRECTOR RESIDING IN ABROAD</u> (Any one or more copies duly NOTARIZED BY <u>NOTARY PUBLIC</u> of the respective country, where the Director is resident of)</p> <p><u>Photo Identification Proof:</u></p> <p>Passport with VISA details <input type="checkbox"/></p> <p>Driving License <input type="checkbox"/></p> | <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> | <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> |

| | | | |
|------|---|---|---|
| | <p>Social Security Number</p> <p>Citizen Card</p> <p>Residence Proof:</p> <p>Passport copy</p> <p>Driving License</p> <p>Electricity Bill</p> <p>Telephone Bill</p> | <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> | <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> |
| 1(C) | <p>IN CASE OF FOREIGN DIRECTOR/FOREIGN CITIZEN RESIDING IN ABROAD copies duly NOTARIZED BY NOTARY PUBLIC of the respective country, where the Director is resident of)</p> <p>Photo Identification Proof: (Any One copy)</p> <p>Passport with VISA details</p> <p>Driving License</p> <p>Citizen Card</p> <p>Residence Proof: (Any one copy)</p> <p>Passport with VISA details</p> <p>Driving License</p> <p>Electricity Bill</p> <p>Telephone Bill</p> | <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> | <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> |
| 2 | <p>Online Certificate Enrollment Form with Request Number.</p> | <p><input type="checkbox"/></p> | <p><input type="checkbox"/></p> |
| 3 | <p>Annexure-A Letter of Authority duly attested by the Banker where the Director holds valid bank account.</p> <p>(OR)</p> <p>Annexure-B Letter of Authority duly attested by the Company secretary where Director doesn't have bank account.</p> | <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> | <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> |

Instructions

1. All subscribers are advised to read Certificate Practice Statement of CA.
2. The certificate shall be downloaded onto the same computer / Hardware device (USB token, Smart Card etc.) by login as same computer user account from where the request was initiated.
3. After placing an online request for a certificate, the following activities shall not be carried out until the certificate is successfully downloaded:
 - Formatting of the computer
 - Deletion of computer user account used to logon when the request was initiated
 - Reinstallation or upgrade of the Internet browser on the computer from which the certificate request was initiated.
4. The certificate must not be shared with others or used by them on your behalf.
5. If you lose your key pair, you shall inform the RA Administrator immediately and apply for the revocation of your certificate.
6. Application form must be submitted in person.
7. Incomplete/Inconsistent application is liable to be rejected.

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

TO BE FILLED BY RA OFFICE

The above details have been verified and found to be correct.

Signature of RA Office

Name:

Date:

SADHVI DIGITAL SOLUTIONS

10, Dhanalakshmi Complex, near Sangeeth Mahal, Subramaniyapuram, Trichy -620020
Ph: 0431- 3204292 Cell: 9600026062 / 9043164054

This certificate Request Form and the Document Checklist along with all the supporting documents have to be forwarded to the Office at the following address:

Duly mark the envelope as 'APPLICATION FOR CLASS III DIGITAL CERTIFICATE'

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