



**PAYMENT DETAILS\***

13. Mode of Payment \*  Online  Cheque/DD

**Online Payment Details**

Transaction/Reference No.	<input type="text"/>
Bank Name	<input type="text"/>
Account Type	<input type="text"/>
Amount Rs.	<input type="text"/>
Date	<input type="text"/>

**Cheque/DD Payment Details**

Cheque /DD No.	<input type="text"/>
Bank & Branch Name	<input type="text"/>
Account Type	<input type="text"/>
Amount Rs.	<input type="text"/>
Date	<input type="text"/>

**DECLARATION\***

I hereby agree that I have read and understood the provisions of eMudhra Certification Practice Statement (CPS) and the subscriber agreement and will abide by the same. The information provided in this Digital Signature Certificate request form is true and correct to the best of my knowledge and I accept publishing my certificate information in eMudhra repository.

Date : \_\_\_\_\_ Place: \_\_\_\_\_ Name of the Applicant: \_\_\_\_\_  
 Office Seal & Stamp: \_\_\_\_\_ Signature: \_\_\_\_\_

**CHECKLIST OF DOCUMENTS TO BE SUBMITTED ALONG WITH THE APPLICATION\***

- a.  ID proof of applicant as selected in S.No. 12
- b.  Authorisation letter in favour of the certificate applicant from the department / organisation as per format below

**TO BE FILLED BY RA OFFICE ONLY\***

I declare that the applicant has provided correct information in this application form. I have checked and verified the application form and supporting documents.

RA Name : \_\_\_\_\_  
 Signature : \_\_\_\_\_  
 Place : \_\_\_\_\_  
 Date : \_\_\_\_\_

**RA Seal & Stamp**

**AUTHORISATION LETTER FORMAT\* (This is required on the organization letter head duly signed by the Head of Office or JS (Admin.) for Government Sector**

To, \_\_\_\_\_ Date: \_\_\_\_\_

eMudhra Consumer Services Limited  
 3rd Floor, Sai Arcade, 56 Outer Ring Road  
 Deverabeesanahalli, Opp Intel  
 Bangalore 560103  
 Phone: +91 80 4336 0000

Dear Sir,  
 Sub: **Authorisation letter for obtaining Digital Signature Certificate.**

This is certify that Mr./Mrs./Miss. \_\_\_\_\_ (Certificate applicant) has provided correct information in the 'Application form for issue of Digital Signature Certificate" as a subscriber of Government Sector to the best of my knowledge and belief vide application form dated DD-MM-YYYY. I hereby authorize him/her, on behalf of our Organisation to apply for obtaining the following:

Class of Digital Signature Certificate issued by e-Mudhra.

- Class 2 Gold Organisation       Class 3 Platinum Organisation       Class 3 Device/Server

Details of Executive Authorising the applicants:

Signature: \_\_\_\_\_ Name: \_\_\_\_\_  
 Designation: \_\_\_\_\_ Employee Code: \_\_\_\_\_  
 Department: \_\_\_\_\_ Office Seal and Stamp

**CONTACT DETAILS**