





Customer Identificati	on Number :	(for office use o	nly)
Validity 1 Year O 2 Y	Year O Type Only Signing	O Sign & Encrypt O	Affix recent
Applicant Name Surname	First Name	Middlename	passport size photograph of the applicant
Email ID		Date of Birth	Applicant to sign acro the photograph extend to application form
Residential Address			
As mentioned in attached upporting)			
Town/City/District		State/Union Territory	
PIN	Contact No.	РН МО	
dentity Detail of Applicant	Please tick any one and enclose the o	copy of same	
Card ID Card	Driving Passport Gov License ID C vide the PAN Card details and enclose	ard by applicant with attestation by co	
and understood guidelines for st	orage of private keys mentioned in (n)Co	S and the subscriber agreement and promise to de Solutions CPS and risk involved by using ot g USB Crypto Tokens to store private key.	
DETAILS REQUIRED IF AP	PLICANT IS FOREIGN NATIONAL	: Nationality :	
Visa Details :		Passport :	

- revocation of certificate. 4. Incomplete application is liable for Rejection. The rejected form would be physically discarded after 15 days from the date of rejection. No request
- 7. The Validity of address proof in case of utility bills shall not be older than 3 months from the date of application.
- 8. For any assistance Please get in touch with us at : dscsupport@ncode.in or call : 1800 - 233 - 1010.

would be entertained with respect to rejected form after the rejection period.

Date : Place :	Signature of Applicant
Verified by (n)Code Office	For LRA use only
	All Documents Checked & Verified by :
Seal & Signature	LRA Name, Seal & Signature
	Toll Free : 1800 – 233 – 1010 (n) www.ncodesolutions.com
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(n)Code Solutions

Customer Identific	ation Number :	(for office use only)		
	Documents R	equired for Verification		
Checklist of the do	cument to be submitted v	with Application		
Attested copy of any PAN Card OR OR OR	O Driving OR O F License OR O F	Passport OR Post Office ID Card ssbook containing photo & signed ion by concerned Bank Officer	OR O Governmen ID Card	
Document as proo	f of Address (Please tick t	he one submitted)		
Attested copy of doo	uments as proof of Address.	(Please tick the one submitted)		
O Telephone O Bill	Voter OR ID Card	Passport O Gas Connec	ton	
O Electricity O Bill	Water OR Bill		y Tax / Corporation Tax al Corporation Receipt	
0	Bank Statement attested by the Bank		s Tax / VAT Tax / ax Reg. Certificatte	
ayment Details (App	licable for applicant obtaining	g DSC from any of (n)Code Offices)		
heque / D.D. to be Draw	n in favour of "(n)Code Solutions, I	Division of GNFC Ltd." (Cheque should be	'Payable at Par")	
Date : B	ank Name :	DD / Cheque No. :	Amount :	

## (n)Code Offices Corporate Office Ahmedabad : 079-4000 7300 • dscsales@ncode.in

Mumbai 022-22048908 mumbaisales@ncode.in Delhi 011-26452279/80 northsales@ncode.in Bangalore 080-25272525 southsales@ncode.in Chandigarh 0172-2707732 punjabsales@ncode.in Surat 0261-3003690 suratsales@ncode.in

n)

Toll Free : 1800 – 233 – 1010

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Corporate Office : (n)Code Solutions, 301, GNFC Infotower, Bodakdev, Ahmedabad-380054