

APPLICATION FORM - SIGNATURE CERTIFICATE

FOR DGFT (EXPORT / IMPORT)



Application ID: (S)

(For Office Use Only)

PLEASE FILL IN BLOCK LETTERS ONLY. ALL FIELDS ARE MANDATORY

More Instructions available at: <http://www.e-mudhra.com/instruction.html>

APPLICANT INFORMATION

LASTNAME										FIRST NAME										MIDDLE NAME										NAME									
<input type="text"/>										<input type="text"/>										<input type="text"/>										<input type="text"/>									
Date of Birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Nationality	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																				
Organisation Name	<input type="text"/>																																						
Department	<input type="text"/>																																						
Org Address	<input type="text"/>																																						
<input type="text"/>																																							
<input type="text"/>																																							
City	<input type="text"/>										Pin code	<input type="text"/>																											
State	<input type="text"/>																																						
PAN of Applicant	<input type="text"/>										Mobile	<input type="text"/>																											
IEC Code	<input type="text"/>										Branch Code	<input type="text"/>																											
Email ID	<input type="text"/>																																						

Affix recent passport size photograph of the applicant **duly signed across**

CLASS:

DGFT

TYPE:

Signature

VALIDITY:

1 Year 2 Years

DOCUMENT PROOF (attested by Authorized Signatory of the Organization)

Organization Type: Company Partnership Proprietorship AOP/BOI LLP NGO/TRUST

Document Name	Company	Partnership	Proprietorship	AOP/BOI	LLP	NGO/Trust
Copy of Applicant's Organizational ID Card / Letter of ID Proof by Organization / Pay Slip	✓	✓	✓	✓	✓	✓
Copy of Organizational PAN Card	✓	✓		✓	✓	✓
Copy of Bank Statement (First 2 Pages)	✓	✓	✓	✓	✓	✓
Copy of Incorporation/Registration Certificate	✓			✓	✓	✓
Copy of AOA & MOA / Rules / Bye laws (First 2 Pages)	✓			✓	✓	✓
Copy of Last Income Tax Return / Audit Report & Annual Return (First 2 Pages) / Self Affidavit on Letter Head with valid Reason, If ITR / Audit Report & Annual Return not available.	✓	✓	✓	✓	✓	✓
Copy of Partnership Deed / Trust Deed / LLP Agreement containing the List of Partners / Signatories (2 Pages)		✓			✓	✓
Copy of Business Registration Certificate (S&E / ST / VAT)			✓			
Proof of Authorized Signatory (Board Resolution) (Suggested Format Attached for Reference)	✓			✓	✓	✓
Self Attested Authorized Signatory Organizational Card / Self Attested Letter of Organizational Identity	✓	✓	✓	✓	✓	✓
Copy of PAN Card of Applicant, if PAN provided	*	*	*	*	*	*
Copy of Import Export Certificate.	✓	✓	✓	✓	✓	✓

DECLARATION BY APPLICANT

I hereby agree that I have read and understood the provisions of e-Mudhra Certification Practice Statement (CPS) and the subscriber agreement and will abide by the same. The information provided in this form is true & correct to the best of my knowledge. I accept publishing my certificate information in e-Mudhra repository. I am aware of risks associated in case of Class 1 Certificate, when storing the private key on a device other than a FIPS 140-1/2 validated cryptographic module.

Date

Place

Signature of the applicant
(As in ID proof | Blue Ink Only)

AUTHORIZATION

I hereby authorize the above applicant, on behalf of our Organisation to apply for obtaining the Digital Signature/ Encryption Certificate issued by e-Mudhra

Authorized Signatory (Sign and Seal)

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. I hereby take full responsibility for any wrong verification made, or wrong documents submitted for the application.

Date

RA Name, Code & Seal

Signature of RA

Letter of Identity Proof by Organization

(To be printed on organization letter head / Office seal. To be signed by HRD of Organization / Authorized Signatory / Government Department in-charge. To be used if the Organizational ID card is not available for the applicant.)

To:

eMudhra Limited

Bangalore

Subject: Organizational ID Proof of the applicant

Organization Name: _____

Name of the Individual	
Org ID Number (if available)	
Designation	
Department	

I hereby confirm the Identity of the above Individual. I'm the Authorized Personnel to certify the Identity on behalf of the Organization.

For the Organization,

(Seal & Signature)

Name: _____

Designation: _____

Board Resolution (Suggested format)

(To be printed on organization letter head)

CERTIFIED TRUE COPY OF THE RESOLUTION PASSED AT THE MEETING OF THE BOARD OF DIRECTORS
OF (Company Name) _____ HELD ON (Date) _____
AT (Address) _____

RESOLVED THAT the company has decided to authorize, Mr. / Ms. _____
_____ and is hereby authorized to sign and submit all the necessary papers, letters,
forms, etc to be submitted by the company in connection with “authorizing any of the personnel of
the company (applicant) to procure Digital Certificate”. The acts done and documents shall be binding
on the company, until the same is withdrawn by giving written notice thereof.

Specimen Signatures of Authorised Signatory:

(Signature)

RESOLVED FURTHER THAT, a copy of the above resolution duly certified as true by designated director
/ authorised signatory of the company be furnished to eMudhra Limited and such other parties as may
be required from time to time in connection with the above matter.

For the Organization,

(Seal & Signature)

Name: _____

Designation: _____