Biz~Support

TATA CONSULTANCY SERVICES

CERTIFYING AUTHORITY
Recognized by the controller of Certifying Authorities

TATA

TATA CONSULTANCY SERVICES LIMITED – CERTIFYING AUTHORITY
CHARTERED INFORMATION SYSTEMS PVT. LTD. - REGISTERING AUTHORITY
REQUEST FORM FOR CLASS-2 CERTIFICATE – User Type - Individual

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**

GENDER * ☐ **Male** ☐ **Female**

Name *
(Full Name)

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

Residential Address *

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

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

Identity and Residence

Passport		Driving License	

Identity

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

Residance

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

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.

Applicant Declaration	**RA 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.	I hereby confirm that I have received and verified the documents submitted by the subscriber.
Date: Place: Signature of Applicant	Date: Place: Signature of RA Office