





## Registration Form for (n)21 Digital Certificate [Individual]

Customer Identification Num (For Office Use Only)	ber:	
Instructions:		Affix recent
<ol> <li>Please fill the form in B</li> <li>(n)21 Certificate refers</li> </ol>	passport size photograph of	
1. <u>VALIDITY OF (n)21</u> 1 Yr	the Applicant	
2. PROFESSION Director	(sign across photo)	
	Institution Partner OTHERS	
Professional ID		
	As required in the <b>DIGITAL CERTIFICATE</b> ) appears in the Identity Proof matches with the name mentioned	d below)
4. RESIDENTIAL ADDRESS		
Town / City / District		
State / Union Territory		
Pin		
Telephone No.	(STD Code) Phone No Fa	ax No
Mobile Phone No.	(STD code) Thome No	IX INO
5. DATE OF BIRTH		
o. DATE OF BIRTH	DATE MONTH YEAR	
eg.	DD MM YYYY	
6. E-MAIL ADDRESS		
7. IDENTITY DETAILS (Please tick and No.		
fill ANY ONE)	Passport / Driving Lic. / Voter's ID / PAN / PF Ac. /	Ration Card No.
DETAILS	REQUIRED IF APPLICANT IS A FOREIGN NATIO	NΔI
8. <u>DETAILS:</u>	REGUIRED IT AFFEIGANT IS AT ORLIGIN NATIO	IVAL
Nationality		
Passport No.		
Visa Details		
Page 1 of 2	Licensed Certifying Authority Version 1.1	







## (n)21 Registration Form for (n)21 Digital Certificate [Individual]

For Office	er Identification Number: Use Only)		
Do	cuments Required and Submitted by the Applicant		
Α	Attested* Copy of any one: (Please tick the one submitted)  Passport / Driving License / Voters ID / PAN Card / PF Statement/PF Book / Ration Card		
В	Attested* Copy as address proof of any one: (Please tick the one submitted)  Latest telephone bill (landline or mobile) / Latest electricity bill / LIC receipt (if LIC policy is taken by applicant)		
С	<ul> <li>Documentary Proof of Professional Membership (ICAI, ICS)</li> <li>Latest Photograph of the applicant</li> <li>Only for Directors / Partners</li> <li>Declaration giving Director / Partner details duly attested by</li> </ul>		
*	Attestation may be by a Bank Manager of a Nationalized or Priva Notary / Class I Gazetted Officer / Company Secretary. In case the address on application is same as on document sub- mentioned in <b>B</b> is not required	ate bank (excluding Cooperative banks) / Public mitted under <b>A</b> (as above) then document	
hereby a \greemer	gree that I have read and understood the provisions of the and promise to abide by the same.		
Place Date	<u> </u>	Signature Of Applicant Name:	
Cheque	e / D.D. to be Drawn in favour of		
	Payment Details	LRA Details	
1	Cheque No. :	Checked & Verified By	
Date :	Amount:		
Bank N	lame :		
8 <u>4 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1</u>		LRA Name / Signature / Stamp	
ontact :	www.ncodesolutions.com E-Mail: support@ncodes	olutions.com Toll Free : 1-800-233-101	
	DECLARATIO ( Applicable for Directors	N	
Γο, n)Code So λ Division		r Faithers )	
This is to certify that Mr. / Ms.		( certificate applicant ) is a	
onafide Director / Partner of			
Details of Name	Attesting Authority		
Profession			
Profession	al Membership No		
Date		Signature with Stamp/Seal	
Place			
Dage 2 of	2 Licensed Certifying Author	version 1	