

# UNDERTAKING FOR DIGITAL SIGNATURE CERTIFICATE RENEWAL REQUEST



Application ID Number (For office use only):

To,  
e-Mudhra Consumer Services Limited.

Date:

**Instructions:**

1. Please fill the form in BLOCK LETTERS only.
2. [\*] MARKED Fields are Mandatory.
3. Any discrepancy or inconsistency in the form will lead to delay and / or rejection.
4. For renewal of Organisation certificate, please attach request letter from the Organisation.
5. Please use new Digital Signature Certificate Application form, if the original information of the subscriber has changed.

**REASON FOR RENEWAL\***

I (applicant name as mentioned in the digital signature certificate) hereby request you to renew or reissue my digital signature certificate bearing application ID number XXXXXXXX. The reason for request for renewal is as below: (Please tick)

1.  Original Certificate Expired

**2. Original Certificate revoked due to:**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Private Key Compromise                     | <input type="checkbox"/> Use of digital signature discontinued    | <input type="checkbox"/> Transferred/Resigned/Retired from the company |
| <input type="checkbox"/> Loss of Private Key                        | <input type="checkbox"/> Death of the subscriber                  | <input type="checkbox"/> Original misplaced                            |
| <input type="checkbox"/> Original corrupted                         | <input type="checkbox"/> Dissolution of the company               | <input type="checkbox"/> Change of Organisation                        |
| <input type="checkbox"/> Information in the certificate has changed | <input type="checkbox"/> Certificate lost due to download failure | <input type="checkbox"/> Others please specify: _____                  |

**OTHER DETAILS\***

3. Renewal requested for \*  1 Year  2 Years

**4. Contact Details\***

Telephone No.\*

Mobile No.\*

Email ID\*

**PAYMENT DETAILS\***

5. Mode of Payment\*  Online  Cheque/DD

**Online Payment Details**

**Cheque/DD Payment Details**

Transaction/Reference No.	Cheque/DD No.
Bank Name	Bank & Branch Name
Account Type	Account Type
Amount Rs.	Amount Rs.
Date	Date

**DECLARATION\***

I hereby confirm that the status of my certificate information submitted at the time of procurement of original digital signature certificate vide application ID number mentioned above has not changed and renewal certificate may be issued with same information as per the original certificate information and I accept publishing my certificate information in e-Mudhra repository.

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

**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 Code:                      Name:

Signature:

Date:                              Place:

**RA Seal & Stamp**

**CONTACT DETAILS**

**eMudhra Consumer Services Limited**, D.No.2 / 30 A, 1st Floor, Natesa Pandaram Colony, Cherry Road, Landmark: Opp to Post Office, Salem - 636 007. Tamil Nadu

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**CONFIDENTIAL**

