

ORG

User Type: Organization

Type of Certificate	: Signing /	Identification	Certificate
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Validity of Certificate (tick one):	☐ 1 year	2 years
Class of Certificate (tick one):	☐ Class 2	Class 3
RA Name:		Request No:

- 1) Please read the "Instructions Box" to fill this form.
- 2) Please fill the Application Form in block letters.
- 3) Items marked with * are mandatory.

STAPLE ONLY (DO NOT GLUE)

recent passport size photograph of the Applicant.

Applicant to sign on the reverse side of the photograph.

1 APPLICANT DETAILS
*Surname:
*Given Name:
Initials: *Gender: Male Female
*Father's/Husband's Name:
*Mother's Name:
*Nationality: *Date of Birth: DD/MM/YYYY //
For Foreign Nationals:
Passport No: Country:
Passport Expiry Date:
Visa No:
Visa Date of Issue: DD/MM/YYYY//
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E: helpdesk@dohatec-ca.com.bd; esign@dohatec-ca.com.bd



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*House Identifier:	
*Street Address:	
*City:	*Post Code:
Upazila/PS:	
*District:	
State:	*Country:
*E-Mail:	
Alternative Email:	
*Mobile:	
	Fax:
3 ORGANIZATION DETAILS	☐ Corporate ☐ Branch ☐ Registered Office
*Organisation Name:	
*Designation of Applicant:	
*House Identifier:	
*Street Address:	
*City:	*Post Code:
Upazila/PS:	
	*Country:
*E-Mail:	
Website: www	
Website: www*Telephone:	



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APPLICANT DETAILS

TYPES OF ACCEPTABLE ID		TYPES OF ATTESTING	TYPES OF ATTESTING AUTHORITY / OFFICE	
Primary ID:	Secondary ID: • Birth Registration Certificate • TIN Certificate	 Gazetted Officer Public University Teacher Private University VC/Registrar College Principal 	 City Mayor Municipality Chairman Nationalized Commercial Bank Manager 	

- Application Form with all supporting documents must be submitted to the Registration Authority's office.
- Please provide appropriate identification details of the selected document.
- All documents and subscriber <u>proof of identity</u> / <u>residence</u> must be **attested** by an Attesting Authority before submitting.
- For proof of identity and residence, two Primary IDs are required. If the Subscriber does not have two Primary IDs, one Primary ID and one Secondary ID must be provided.

If the residence address provided on page 1 of this Form <u>matches</u> with the address in the Primary ID proof, complete **Box A** only.

If the residence address submitted on page 1 of this Form <u>does not match</u> with the address in the Primary ID proof, complete **Boxes B** and **C** only. In addition, an affidavit or a suitable declaration as evidence (to the satisfaction of the Registration Authority [RA]) must be submitted.





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Identity and residence proof (Select two IDs, one must be a Primary ID)
PRIMARY ID
National ID:
☐ National ID:
Passport No:
Employee ID:
☐ Driving License:
SECONDARY ID
☐ Birth Registration Certificate:
☐ TIN Certificate:
Identity proof (Select two IDs, one must be a Primary ID)
PRIMARY ID
☐ National ID:
Passport No:
Employee ID:
☐ Driving License:
SECONDARY ID
☐ Birth Registration Certificate:
☐ TIN Certificate:
BOX C Residence proof (Select one)
Utility bill: WASA Electricity Gas
☐ Ward Commissioner's Certificate:
☐ Municipality Tax (bill no):





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PROOF OF ORGANIZATION Corporate / Branch / Registered office (any one ATTESTED copy required)
*Attested copy of Organization TIN certificate:(*Mandatory requirement for Organization)
☐ PUBLIC LIMITED COMPANY
Certificate of Incorporation:
Business Commencement:
☐ Memorandum and Articles of Association:
Latest Annual Report:
☐ PRIVATE LIMITED COMPANY
Certificate of Incorporation:
☐ Memorandum and Articles of Association:
Latest Annual Report:
☐ PARTNERSHIP FIRMS
Partnership Deed:
☐ PROPRIETARY FIRMS
☐ Trade License:
☐ VAT Certificate:
Latest Bank Statement:
Latest Balance Sheet:



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INSTRUCTIONS BOX

- All subscribers are advised to read the Certificate Practice Statement of CA.
- The Certificate shall be downloaded onto the same computer / hardware device (USB token, smart card etc.) by login from the same computer user account from where the request was initiated.
- The Certificate must not be shared with others or used by anyone else on your behalf.
- Certificate revocation is permanent and irreversible. If your Certificate is revoked, you will have to reapply for a fresh Certificate.
- It is your responsibility to remember the passwords that are used while generating/ exporting the certificates/keys.

- If you lose your key pair, you shall inform the RA Administrator immediately and apply for the revocation of your Certificate.
- After placing an online request for a Certificate, the following activities shall not be carried out until the certificate is successfully downloaded:
 - · Formatting of the computer
 - Deletion of computer user account used to logon when the request was initiated
 - Reinstallation or upgrade of the internet browser on the computer from which the certificate request was initiated.
- Application form must be submitted in person or through proper authorization.
- Incomplete/Inconsistent application is liable to be rejected.

6 APPLICANT DECLARATION
I, hereby confirm that, I have read and understood the above instructions and will follow the same for obtaining and using the Digital Certificate.
Date: DD/MM/YYYY// Place:
Signature of the Applicant
7 REGISTRATION AUTHORITY (RA'S) DECLARATION
I, hereby confirm that, I have received and verified the documents submitted by the subscriber.
Date: DD/MM/YYYY / / Place:
Signature of the RA Administrator

The certificate request form, demand draft and the supporting documents as per the document checklist have to be forwarded to the following address. (Mark the envelop as 'APPLICATION FOR DIGITAL CERTIFICATE'):

Registration Authority (RA's) office Dohatec CA DOHA House 43 Purana Paltan Line Dhaka 1000, Bangladesh





Subscriber Application Form User Type: Organization

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3 DOCUMENTS CHECKLIST All photocopy documents should be attested
The Applicants must submit the following relevant documents to the Registration Authority's office: GENERAL DOCUMENTS REQUIRED
One original and two photocopies of the completed Application Form
☐ Three copies of completed online Certificate Enrollment Form Request No.
Three recent passport sized colour photographs depicting full face (not exceeding 6 months) of the Applicant (applicants to sign on the reverse side of the photograph)
Method of Payment (tick one): Demand Draft Pay Order
One original copy of Authorization Letter and two photocopies
☐ Three sets of Organization TIN Certificate photocopy
PRIMARY ID PROOF (as applicable):
☐ Three sets of National ID photocopy
☐ Three sets of Passport photocopy page 1-5 (information page for Machine Readable Passport)
☐ Three sets of Employee ID photocopy
☐ Three sets of Driving License photocopy
SECONDARY ID PROOF (as applicable):
☐ Three sets of Birth Registration Certificate photocopy
☐ Three sets of TIN Certificate photocopy
PROOF OF RESIDENCE:
☐ Three sets of latest utility bill (not exceeding 3 months) photocopy such as WASA, electricity, gas bill
☐ Three sets of Ward Commissioner's Certificate photocopy
☐ Three sets of Municipality Tax photocopy

(Checklist continued next page)





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PROOF OF ORGANIZATION (as applicable):
☐ PUBLIC LIMITED COMPANY
☐ Three sets of Certificate of Incorporation photocopy
Three sets of Business Commencement photocopy
☐ Three sets of Memorandum and Articles of Association
☐ Three sets of latest Annual Report photocopy
☐ PRIVATE LIMITED COMPANY
☐ Three sets of Certificate of Incorporation photocopy
☐ Three sets of Memorandum and Articles of Association
☐ Three sets of latest Annual Report photocopy
PARTNERSHIP FIRMS
☐ Three sets of Partnership Deed photocopy
PROPRIETARY FIRMS
☐ Three sets of Trade License photocopy
☐ Three sets of VAT Certificate photocopy
☐ Three sets of latest Bank Statement photocopy
☐ Three sets of latest Balance Sheet photocopy
NOTE: The RA Administrator reserves the right to request for additional documents as deemed necessary



ANNEXURE A - AUTHORIZATION LETTER

(Please print out this form on letterhead and complete as shown.)

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in the capacity of the	
of	
whose signature is attested below to carry o	
for the application of a Class-2 / Class-3, Dig	
year(s).	
Signature of the Authorizing Person	Signature of the Applicant
Designation of the Authorizing Person	Designation of the Applicant