

असाधारण EXTRAORDINARY

भाग II — खण्ड 3 — उप-खण्ड (i) PART II — Section 3 — Sub-section (i)

प्राधिकार से प्रकाशित PUBLISHED BY AUTHORITY

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नई दिल्ली, मंगलंबार, अप्रैल 27, 2004/वैशाख 7, 1926

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NEW DELHI, TUESDAY, APRIL 27, 2004/VAISAKHA 7, 1926

संचार और सूचना प्रौद्योगिकी मंत्रालय

( सूचना प्रौद्योगिकी विभाग )

अधिसूचना

नई दिल्ली, 23 अप्रैल, 2004

सा.का.नि. 285( अ).—सूचना प्रौद्योगिकी अधिनियम, 2000 (2000 का 21) की थारा 87 द्वारा प्रदत्त शक्तियों का प्रयोग करते हुए केन्द्र सरकार एतद्द्वारा दिनांक 17–10–2000 की अधिसूचना सं. सा.का.नि. 789(अ)के जरिए अधिसूचित सूचना प्रौद्योगिकी प्रमाणन प्राधिकारी नियम में निम्नलिखित संशोधन करती है।

- 2. उपर्युक्त अधिसूचना की अनुसूची-IV में कुछ भी दिए जाने के बावजूद ''वैयक्तिक'' श्रेणी के लिए अंकीय हस्ताक्षर प्रमाण=पत्र जारी करने के आवेदन-पत्र में संशोधन किया जाता है। सरकारी और बैंकिंग क्षेत्र के प्रयोगकर्ताओं के लिए अंकीय हस्ताक्षर प्रमाण-पत्र जारी करने के लिए आवेदन-पत्र ''प्रपत्र क'' के अनुसार होगा तथा किसी अन्य प्रयोगकर्ता के लिए अंकीय हस्ताक्षर प्रमाण-पत्र जारी करने के लिए आवेदन-पत्र ''प्रपत्र ख'' के अनुसार होगा।
  - 3. ''वैयक्तिक'' के अलावा आवेदकों की अन्य सभी श्रेणियों के आवेदन-पत्र में कोई परिवर्तन नहीं होगा।

[सं. 11(7)/2003-सीसीए] एस. लक्ष्मीनारायणन, अपर सचिव

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अवस्ता और वैदिस क्षेत्र के समोगकर्त के है	प्रपत्र क लिए अंकीय प्रमाण पत्र जारी करने का आवेदन-पत्र
सरकारा आर बाकन बात्र क प्रयानकता क	लए अकाय प्रमाण पत्र जारा करन का आवदन-पत्र
आवेदित प्रमाण पत्र की श्रेणी :	अपेक्षित प्रमाण पत्र : वैयक्तिक/सर्वर/वेब सर्वर
प्रमाण पत्र की वैधना :	अपेक्षित प्रमाण पत्र : वैयक्तिक/सर्वर/वेब सर्वर
प्रमाण पत्र का वधता : नाम	
र्चान ई-मेल का पता :	
कार्यालय का पता :	
(पदनाम तथा विभाग सहित)	
(वैकल्पिक)	
	दूरभाषे :
पहचान के ब्यौरे :	कर्मचारी पहचान संख्या
	पासपोर्ट संख्या
	कोई अन्य
	(पासपोर्ट संख्या/पैन कार्ड संख्या/वोटर की आईडी कार्ड
	संख्या/ड्राइविंग लाइसेंस संख्या/पीएफ संख्या)
यदि आवेदन-पत्र किसी युक्ति के	वेब सर्वर
लिए है तो सर्वर/युक्ति के ब्यौरे	सेवाएँ
जिसके लिए प्रमाण पत्र के लिए	आईपी पता
आवेदन किया जा रहा है, अवश्य	यूआरएल/डोमेन नाम
भरे जाने चाहिएँ ।	वास्तविक स्थान
तारीख:	
रथान:	(आवेदक के हस्ताक्षर)
सरकारी क्षेत्र के आवेदक के लिए कार्यालय	प्रमुख अथवा संयुक्त सचिव (प्रशासन)/वैकिंग क्षेत्र के आवेदक के
लिए वरिष्ठ प्राधिकारी के लिए	
यह प्रमाणित किया जाता है कि श्री/श्रीमत	नी/कृमारी ने
	रकारी तथा बैंकिंग क्षेत्र के ग्राहक के लिए अंकीय प्रमाण पत्र
	। दी है । मैं एतद् द्वारा अपने संगठन की ओर से उन्हें ऊपर
	से अंकीय प्रमाण पत्र प्राप्त करने के लिए आवेदन करने के लिए
ग्रिधकृत करता हूँ ।	
गरीख:	
धान :	
विनाम सहित अधिकारी का नाम :	
	(संगठन/कार्यालय की मुहर सहित अधिकारी के हस्ताक्षर)
गर्यालय ई-मेल :	
नहत्वपूर्ण सूचना :	
	आवेदक द्वारा भरा जाएगा ।
46 011441-47	भावसम् क्षारा चरा जादमा ।

- सभी प्रयोगकर्ताओं को शासपत्रित लेखाकार के प्रमाण पत्र पद्धित विवरण-पत्र को पढ़ने की सलाह दी जाती है ।
- प्रत्येक प्रमाण पत्र श्रेणी के लिए सीपीएस में विनिर्धारित सभी दस्तावेज इस आवेदन-पत्र के साथ जमा किए जाने चाहिएँ ।
- आवेदन पत्र व्यक्तिगत रूप से जमा किया जाना चाहिए ।
- अपर्ण/असंगत आवेदन-पत्र रद्द कर दिए जाएंगे ।

ਸ਼ਧੜ 'ख'

सरकारी और वैंकिंग क्षेत्र के अलावा प्रयोगकर्ताओं के लिए अंकीय हस्ताक्षर प्रमाण पत्र जारी करने के लिए आवेदन-पत्र

आवेदित प्रमाण पत्र की श्रेणी	. M	अपेक्षित प्रमाण पत्र	: वैयक्तिक/सर्वर/वेब सर्वर
प्रमाण पत्र की वैधता	: 11		
नाम	:	.8	
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कार्यालय का पता			A CANADA
(पदनाम तथा विभाग सहित)		entra de la proposición de la companya de la compan	
(वैकल्पिक)			
(44//244/)		दूरभाष :	
निवास स्थान का पता		3/114.	
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लिए है तो सर्वर/युक्ति के ब्यौरे	e Marketta	सेवाएँ	
जिसके लिए प्रमाण पत्र के लिए		आईपी पता	
आवेदन किया जा रहा है, अवश्य		यूआरएल/डोमेन नाम_	
भरे जाने चाहिएँ।		वास्तविक स्थान	
तारीख:		18 12	
स्थान:			(आवेदक के हस्ताक्षर)
* 100			

### पहचान का सत्यापन एवं आवास का प्रमाण

निम्नलिखित की एक अथवा अधिक प्रतिलिपियाँ उपलब्ध कराई जानी चाहिएँ जैसा कि प्रमाणन प्राधिकारी द्वारा अपेक्षित है । प्रमाण पत्र आवेदक के लिए पहचान सत्यापन प्रणालियाँ शासपत्रित लेखाकार के प्रमाणन पद्धित विवरण-पत्र (सीपीएस) में विनिर्धारित कार्यविधि के अनुसार होंगी ।

- 1. पासपोर्ट
- 2. चुनाव कार्ड (मतदाता पहचान-पत्र)
- 3. राशन कार्ड
- 4. बैंक खाते के ब्यौरे
- 5. ड्राइविंग लाइसेंस
- 6. कोई अन्य

## महत्वपूर्ण सूचना:

- यह आवेदन-पत्र आवेदक द्वारा भरा जाएगा ।
- सभी प्रयोगकर्ताओं को शासपत्रित लेखाकार के प्रमाण पत्र पद्धित विवरण-पत्र को पढ़ने की सलाह दी जाती है ।
- प्रत्येक प्रमाण पत्र श्रेणी के लिए सीपीएस में विनिर्धारित सभी दस्तावेज इस आवेदन-पत्र के साथ जमा किए जाने चाहिएँ ।
- आवेदन पत्र व्यक्तिगत रूप से जमा किया जाना चाहिए ।
- अपूर्ण/असंगत आवेदन-पत्र रद्द कर दिए जाएंगे 1

## MINISTRY OF COMMUNICATIONS AND INFORMATION TECHNOLOGY

(Department of Information Technology)

#### NOTIFICATION

New Delhi, the 23rd April, 2004

G.S.R. 285(E).—In exercise of the powers conferred by section 87 of the Information Technology Act, 2000 (21 of 2000), the Central Government hereby makes the following amendments in the IT Certifying Authority Rules notified vide Notification No. G.S.R. 789 (E) dated 17.10.2000.

- 2. Notwithstanding anything contained in Schedule-IV of the above Notification the form for Application for issue of Digital Signature Certificate for the category 'Individual' stands amended. The application form for issue of Digital Signature Certificate for subscriber of Government and Banking Sector shall be as per the "FORM A" and the application form for issue of Digital Signature Certificate for any other subscriber shall be as per the "FORM B".
- 3. The application form for all other categories of applicants other than 'Individual' shall remain unchanged.

[No. 11(7)/2003-CCA]

S. LAKSHMINARAYANAN, Addl. Secy.

#### FORM A

# APPLICATION FORM FOR ISSUE OF DIGITAL CERTIFICATE FOR SUBSCRIBER OF GOVERNMENT AND BANKING SECTOR

				1.0	
Class of certificate appli	ied :	Certif Requi		Individual/Serve	/Web server
Certificate Validity		No Sa till			
Name					
Email Address	:			0.1	<u> </u>
Office Address	n n				
(with Designation and Department)					23
(optional)		20 4	1		
		Telephone:		P01-212	artigar i
Identification Details		Employee Iden	tification No.	No.	
		Passport No Any other			12
de voj se j		(Passport No./F	PAN Card No./Vot se No./PF No.)	ter's ID Card No./	

In case the application is for a device, then	Web Server	antallogate a separa
details of Server/Device for which the		volledviki in itské
certificate is being applied for must		op greed at the county
be filled.	URL/Domain Name	
30	Physical Location	- Astrony
	Thysical Education	
Date:		
Place:		
i lace.	(Sign	ature of the Applican
	(Sign	attire of the Applican
For Head of Office or JS (Admn.) for Go	vernment Sector /Superior Authority for Bank	ing Sector of Applica
arshing to the terms of	to the second of the second of	See Section 1985
This is to certify that Mr./Ms.	has provi	ded correct information
	al Certificate for subscriber of Government and	
	authorize him/her, on behalf of my organization	
Date:		
Place:	in the second	14
Name of Officer with Designation:		
	(Signature of Officer with	stamp of Org./Offic
Office Email:	(8	
mportant Notice:	132.42	
7	to be filled by the applicant.	
***	sed to read Certificate Practice Statement of CA	
<ul> <li>All document specified application form.</li> <li>Application form must be</li> </ul>	d in CPS for each Certificate Class should to be submitted in person.	e submitted with the
<ul> <li>All document specified application form.</li> <li>Application form must be a linear linear</li></ul>	d in CPS for each Certificate Class should to be submitted in person. application is liable to be rejected.	FORM -
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In case the application is for a device, then details of Server/Device for which the certificate is being applied for must be filled.

Web Server
Services
IP address
URL/Domain Name
Physical Location

Date:

Place:

(Signature of the applicant)

#### Authentication of Identity and Proof of Residence

Copies of one or more of the following must be provided, as required by the Certifying Authority. Identity verification methods for the certificate applicant will be as per the procedure specified in the Certification Practice Statement (CPS) of the CA.

- 1. Passport
- 2. Election card (Voter's ID)
- 3. Ration Card
- 4. Bank Account Details
- 5. Driving Licence
- 6. Any Other

#### Important Notice:

- This application form is to be filled by the applicant.
- All subscribers are advised to read Certificate Practice Statement of CA
- All document specified in CPS for each Certificate Class must be accompanied with this
  application form.
- Application form must be submitted in person.
- Incomplete/Inconsistent application is liable to be rejected.