

TATA CONSULTANCY SERVICES – CERTIFYING AUTHORITY

REQUEST FORM FOR CLASS-2 CERTIFICATE
User Type - Government

Instructions:

1. *Please fill the form in **BLOCK LETTERS***
2. *Items marked with * are mandatory.*
3. *For the items marked with #, details for at least one are mandatory*

Affix recent
 Passport size
 Photograph of the
 Subscriber

To be filled in by the Applicant:

PARTICULARS OF ORGANISATION/AGENCIES *

Name	<input style="width: 100%; height: 20px;" type="text"/>
Administrative Ministry/ Department	<input style="width: 100%; height: 20px;" type="text"/>
Under State/Central Government	<input style="width: 100%; height: 20px;" type="text"/>
Flat/Door/Block No.	<input style="width: 100%; height: 20px;" type="text"/>
Name of Premises/ Building/Village	<input style="width: 100%; height: 20px;" type="text"/>
Road/Street/Lane/ Post Office	<input style="width: 100%; height: 20px;" type="text"/>
Area/Locality/Taluka/ Sub-Division	<input style="width: 100%; height: 20px;" type="text"/>
Town/City/District	<input style="width: 100%; height: 20px;" type="text"/>
State/Union Territory	<input style="width: 100%; height: 20px;" type="text"/>
State/Union Territory	<input style="width: 100%; height: 20px;" type="text"/>
Pin	<input style="width: 100%; height: 20px;" type="text"/>
Telephone No.	<input style="width: 100%; height: 20px;" type="text"/>



Pin

Telephone No.

Fax

Mobile Phone No.

Nationality

Visa details, in case of Foreign Nationals

PASSPORT DETAILS #

Passport No.

Passport Issuing Authority

Passport Expiry Date

VOTER'S IDENTITY CARD NO. #

INCOME TAX PAN NO. #

E-MAIL ADDRESS

ORGANISATION BANK DETAILS

Bank Name

Branch

Bank Account No.

To be filled by CHiPS – RA Office

The above details have been verified and found to be correct.

Signature of RA Office
Name:

Date:

Seal:

DOCUMENT CHECKLIST FOR GOVERNMENT TYPE OF CERTIFICATE

The following is a list of the supporting documents that you need to submit along with the Certificate Request Form.

Sl. No.	Particulars	Proof required / Checklist	Status
1	Subscriber Identification document (Attested photo copy of any one of the three)	Passport	
		or Voter Id	
		or PAN Card	
2	Proof of Registration number and Date of incorporation of the Government body. (E.g. Gazette of India)	One Notarized copy (Please see Note 1)	
3	Certificate Request Form (Downloaded) - Duly filled in		
4	Certificate Enrollment Form and Letter of Authority (Downloaded)		
<p>Note 1: If the Department applies for more than one certificate, then one original notarized copy of the Proof of Registration Number and other attested photocopies of the original would be required.</p>			

The certificate Request Form and the Document Checklist along with all the supporting documents have to be forwarded to CHiPS at the following address:

Duly mark the envelope as **'APPLICATION FOR DIGITAL CERTIFICATE'**



Address: Chhattisgarh Infotech and Biotech Promotion Society,
277, Mantralaya, DKS Bhavan
Raipur - 492 001

Email: chips@nic.in
Tel: +91-771-5014158
Fax: +91-771-2221271