ate://
o: P Name : P ID :
/e have subscribed to CDSL's easiest facility with Account of Choice and have opted for
igital Signature with the following details:
Name of Organization :
2. Email Address :
(of Authorised Signatory)
3. Login Name :
4. Name of Authorized
Signatory :
5. Designation :
6. Address :
7. Telephone No. :
8. Mobile No. :
xisting E token Details (if applicable)
Certificate Serial No. :
2. E Token Serial No. :
3. Date of Issue :

We hold the following BO accounts with CDSL and hereby declare that these accounts are held in the same name with the same authorized signatory(ies). We would like to use **one digital signature** for transacting in all the logins of these accounts:

BOID	Name of the Account	Easiest Login Name

FOR USAGE OF DIGITAL SIGNATURE CERTIFICATE					
	BOID	Name of the Account	Easiest Login Name		
Declaration					
The rules and regulations pertaining to CDSL's easiest facility which are in force have been read					
and understood by me/us and I/we agree to abide by and to be bound by the same. I/We declare that the account details given above indeed belong to me/us. Any changes in the details of the					

Sr. No.	Name of Signatory	Signature

account/Digital Signature Certificate {DSC] will be intimated to CDSL through the DP and existing the DSC will not be used. At the time of renewal of the DSC, I/we declare that the details will be

For Office Use Only [DP]

(Not to be filled up by the applicant)

furnished again to CDSL through the DP.

The applications form is verified with the details of the beneficial owner(s) accounts and we certify that the same are in order.

Name of Authorized Signatory:	
Signature :	
(DP stamp & Date)	
For Office Use Only [CDSL]	
Checked by Help Desk Official :	
Authenticated by Manager (Operations):	
Approved by Vice President (Operations):	