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## **Safe-EXIM Digital Certificate Application Form**

### **Instructions to Certificate Applicant**

1. **Complete and print the Safe-EXIM Digital Certificate Application Form** on your Organization's Letter Head
2. **If you, the Certificate Applicant, are not the Authorised Signatory of your organization,** your application form must be reviewed and the second section must be duly completed and signed by the Authorized Signatory of your Organization
  - a) A recent passport copy of your photograph must be pasted in this application form and must be attested by your organizations Authorised Signatory by placing his signature half across the photograph and the application form
  - b) You are responsible for giving the "Instructions to the Authorised Signatory" to the Authorised Signatory of your Organization
3. **If you, the Certificate Applicant, are the Authorized Signatory of your Organization,** then you will need to complete only the first section of this Application Form
  - a) A recent passport copy of your photograph must be pasted in this letter and must be attested by your organizations Official Banker by placing his signature half across the photograph and the application form.
4. The Certificate Application Form contains a field at the top asking for the "Safe EXIM Serial Number". This is the Serial Number that is given at the back of the Safe EXIM pack you have purchased. Please fill in this number carefully and use this for tracking your order with SafeScript.
5. The Safe EXIM Digital certificate Application form must be couriered, in original to SafeScript, for us to complete the Verification Procedure, before we can issue you a Safe EXIM Digital Certificate

***It is strongly recommended that you retain a photocopy of all the documents sent to SafeScript. You will need to refer to them when you enrol online for your certificate.***

As soon as SafeScript approves your application, you will receive an approval e-mail (sent to the e-mail address of the Certificate Applicant listed in the online enrolment) that will provide instructions for picking up your Safe EXIM Digital Certificate.

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## Instructions to the Authorized Signatory

The document you are attesting is part of the enrolment process for a Safe EXIM Digital Certificate. This Digital Certificate will enable the Certificate Applicant to act for and on behalf of your organization on the DGFT portal. The applicant will be able to digitally sign the license applications on behalf of your organization. Before issuing this certificate, SafeScript needs to ascertain that the Certificate Applicant is authorized to request a Safe EXIM Digital Certificate to represent your Organization in interactions with DGFT.

If you would like more information about Digital Certificates or the enrolment process please visit SafeScript designated site at <http://safeexim.safescript.com>

You will need to:

1. Review the completed Safe EXIM digital Certificate Application Form
2. Attest the photograph of the Certificate Applicant by placing your signature half across the photograph and the Application Form
3. Affirm that the Certificate Applicant is an employee of your organization
4. Affirm that the Certificate Applicant has personally completed the online enrolment on the SafeScript designated website.

<To be printed on the Letterhead of the EXIM Organisation>  
**Safe EXIM Digital Certificate Application Form**

**Paste  
Certificate  
Applicants  
Passport-size  
Photograph  
here**

Safe EXIM Serial Number: \_\_\_\_\_

**Certificate Applicant Data (as entered on the Online Enrolment Form)**

Name of the EXIM Organization: \_\_\_\_\_

IEC: \_\_\_\_\_ Branch Code (if applicable): \_\_\_\_\_

Postal Address of the EXIM Organization (as registered with DGFT):  
\_\_\_\_\_

State: \_\_\_\_\_ PIN Code: \_\_\_\_\_ Country: India

First Name of Certificate Applicant: \_\_\_\_\_

Last Name of Certificate Applicant: \_\_\_\_\_

E-mail ID of Certificate Applicant: \_\_\_\_\_

Residence Address of Certificate Applicant: \_\_\_\_\_

State: \_\_\_\_\_ PIN Code: \_\_\_\_\_ Country: India

I do hereby declare that the information furnished above is true to the best of my knowledge and belief, and that I have personally enrolled at SafeScript's designated website for a Safe EXIM Digital Certificate, for use with the DGFT online application, on behalf of my organization. I also confirm that I have read the Subscriber Agreement published on the online enrolment form and also at [https://www.safescript.com/repository/agreements/Subscriber\\_Agmt-RCAI\\_Hierarchy.pdf](https://www.safescript.com/repository/agreements/Subscriber_Agmt-RCAI_Hierarchy.pdf)

(Signature of the Certificate Applicant)

Date: \_\_\_\_\_

(Company Seal)

<This Section to be completed only by the Authorised Signatory, if the Applicant is not the Authorised Signatory>

I, the Authorized Signatory for the above Organisation, certify that on \_\_\_\_\_ (Date), the Certificate Applicant, as stated above, is an employee of our organization with Employee ID number \_\_\_\_\_ (Employee ID of the Certificate Applicant).

I also certify that the Certificate Applicant mentioned above is authorized to interact with DGFT for and on behalf of our organization through DGFT's online web-application. Specifically, the Certificate Applicant is authorized to sign the various DGFT license applications.

I hereby authorize the above Certificate Applicant to apply for and request a Safe EXIM Digital Certificate, valid for one year from the date of issuance. The Certificate Applicant has personally done the online enrolment for the SafeEXIM Digital Certificate at the SafeScript designated website.

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**I understand that, while holding a valid Safe EXIM Digital Certificate, if this certificate ever needs to be revoked, it is my organizations responsibility to inform SafeScript regarding the same.**

**I have read the “Instructions to the Authorized Signatory” and acknowledge by my signature, that the information in this document is complete and accurate as per our office records.**

Full Name of Authorised Signatory: \_\_\_\_\_

Designation: \_\_\_\_\_

E-mail ID: \_\_\_\_\_

**(Signature of Authorised Signatory)**