

# LETTER HEAD

## Authorization Letter by Organization

To,

Capricorn Identity Services Pvt. Ltd.

G-5, Vikas Deep Building, Plot-18,

Laxmi Nagar District Centre, Delhi- 110 092, India

### Subject: Authorization of the applicant by the organization

I hereby Authorize the below applicant to apply for Digital Signature / Encryption Certificate, on behalf of the Organization.

Organization Name: \_\_\_\_\_

Department Name: \_\_\_\_\_

Name of the Applicant:

Designation:

Email ID:

Contact NO.:

Class of Certificate Class 2/ Class 3

Type of the Certificate Signature/ Encryption/ Combo

For the Organization,

### Authorizing Person Name

Name: \_\_\_\_\_

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

Contact: \_\_\_\_\_

(Seal & Signature)