GNFC

(n) e XIM

Registration Form for (n) eXIM Digital Certificate

(n) Code Solutions
e-Safe • e-Secure • e-Sure

Customer Identificaton Number : _____
(For Office Use Only)

Affix recent passport size photograph of the Applicant

Instructions :

1. The Form is divided into 2 parts ; **Form A** and **Form B**.
2. **Form A** contains details of certificate applicant.
   Form B contains organizational details.
3. Please fill the form in **BLOCK LETTERS in English only.**
4. **(This form is for procuring (n)eXIM Digital Certificate for usage in DGFT [Directorate General for Foreign Trade])**
5. (n)eXIM Certificate refers to Class-IIIb

FORM A

1. **VALIDITY OF (n) EXIM**

   ☐ 1 Yr.   ☐ 2 Yrs.

2. **IEC Number :** ☐☐☐☐☐☐☐☐☐☐   Branch Code : ☐☐☐

3. **NAME OF THE APPLICANT** (As required in the **DIGITAL CERTIFICATE**)
   (Ensure that the name as it appears in the identity Proof matches with the name mentioned below)

4. **Organization Name**

   Office Address

   Town / City/ District

   State / Union Territory

   Pin

   Contact No.

   (STD Code)   Phone No.   Fax No.

   Mobile Phone No.

5. **DATE OF BIRTH**

   Date   Month   Year
   eg. 2 2   O C T   1 9 7 7

6. **E-MAIL ADDRESS**

7. **IDENTITY DETAILS No.**
   (Please tick and fill **ANY ONE**)

   Passport / Voter's ID / PAN / Driving Lic. / Ration Card No. / PF Ac.

DETAILS TO BE FILLED UP FOR EXIM ORGANIZATION

Corporate / Reistered Office details (as registered with DGFT [Directorate General for Foreign Trade]) :

Name
(As appears in IEC Certificate)

Address

Town / City/ District

State / Union Territory

Pin

Contact No.

(STD Code)   Phone No.   Fax No.

Website

Income Tax PAN.

Bank Details :
   Bank Name

   Bank A/c No.

Licensed Certifying Authority

Customer Identificaton Number : _____

(For Office Use Only)

I hereby agree that I have read and understood the provisions of the (n) Code Solutions CA CPS and the Subscriber Agreement and promise to abide by the same.

Place : _____

Date : _____

Signature of Applicant

[Name   ]

Registration from for (n)eXIM along with verification documents can be sent to any one of the nearest LRA locations given on *(n) Code Solutions CA website.*

Cheque should be in the name of **H R Global Finance Ltd. For faster processing.**

Cheque / D.D. to be Drawn in favour of **"(n) Code Solutions, Division of GNFC Ltd."**

Cheque should be **"Payable at Par".**

Duly mark the envelop as **"Application for (n)eXIM".**

Website : www.ncodesolutions.com

E-mail : support@ncodesolutions.com

Help line : 91-79-26857315

DOCUMENTS REQUIRED FOR VERIFICATION

Documents Required and Submittd by the Applicant (POR : Proof of rights documents)
Documents required for an Organization / Enterprise for (n) eXIM
Certified true copy (from Company Secretary / Director / Partner / Proprietor of the organization) of any one : ❑ Certificate of Incorporation or ❑ Memorandum and Articles of Association or ❑ Registered Partnership Deed or ❑ Valid business license document
Certified true copy of any one : ❑ Annual Report or ❑ Income Tax Return or ❑ Statement of Income or ❑ Letter from the bank giving bank details of the organization
❑ Authorization Letter in favour of the certificate applicant from the applicant organization (as per the format attached herewith, on the Company's Letterhead Only) ❑ Latest photograph of the applicant
❑ IEC Certificate Photocopy

Note : ● Applicants for (n)eXIM shall present themselves at the LRA location where the registration from for (n) eXIM was sent, for verification of physical presence.

● Please refer to the CPS for more information.

Signature Verfication (Authorization) Letter
(This Authorization Letter is requried on the Organization's letterhead)

To
(n) Code Solutions,
A Division of Gujarat Narmada Valley Fertilizers Company Limited

This is to certify that :

Mr. / Ms. _____ *(certificate applicant)*

has provided correct information in the application form for issue of (n) exim Digital Certificate to the best of my knowledge and belief

and is working with _____ (EXIM organization name).

He/She is hereby authorized to obtain a (n) eXIM Digital Certificate to be used for DGFT (Directorate General for Foreign Trade) application and issued by (n) Code Solutions CA.

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 authoirzed to sign the various DGFT license applications. I understand that, while holding a valid (n)eXIM Digital Certificate, if this certificate ever needs to be revoked, it is my organization's responsibility to inform (n) Code Solutons regarding the same.

Details of Authorized Person :

Name : _____

Designation : _____

Organization Name : _____

Signature of Authorized Person : _____

(with stamp of Orgn./ Office)

Date : _____

Place : _____

Licensed Certifying Authority