



## Registration Form for (n)eXIM Digital Certificate

**Customer Identification Number:** \_\_\_\_\_  
(For Office Use Only)

### 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

Affix recent  
passport size  
photograph of  
the Applicant

(sign across photo)

**FORM A**

### 1. VALIDITY OF (n)eXIM

☐ 1 Yr. ☐ 2Yrs.

2. **IEC Number :**

**Branch Code :**

(As assigned to your company's branch for operating in the city)

### 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  
(As per Branch Code)

Town / City / District

State / Union Territory

Pin

Contact No.

(STD Code)

Phone No

Fax No

Mobile Phone No.

### 5. DATE OF BIRTH

DATE  
DD

MONTH  
MM

YEAR  
YYYY

eg.

### 6. E-MAIL ADDRESS

### 7. IDENTITY DETAILS

(Please tick and  
fill ANY ONE)

No.

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



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FORM B

### DETAILS TO BE FILLED UP FOR EXIM ORGANIZATION

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

Name (As appears in IEC Certificate)	<input type="text"/>																													
Address	<input type="text"/>																													
Town / City / District	<input type="text"/>																													
State / Union Territory	<input type="text"/>																													
Pin	<input type="text"/>																													
Contact No.	<input type="text"/>					<input type="text"/>										<input type="text"/>														
	(STD Code)					Phone No										Fax No														
Website	<input type="text"/>																													
Income Tax PAN.	<input type="text"/>																													
Bank Details :																														
Bank Name	<input type="text"/>																													
Bank A/c No	<input type="text"/>																													

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: \_\_\_\_\_]

Cheque / D.D. to be Drawn in favour of \_\_\_\_\_

Payment Details	LRA Details
D.D. / Cheque No. : _____	Checked & Verified By
Date : _____ Amount: _____	
Bank Name : _____	
_____	LRA Name / Signature / Stamp



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#### DOCUMENTS REQUIRED FOR VERIFICATION

##### Documents Required and Submitted 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 Companys 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 form of (n)eXIM was sent, for verification of physical presence.
- Please refer to the CPS for more information.



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**Signature Verification (Authorization) Letter**

*(This Authorization Letter is required 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 web-application. Specifically, the Certificate Applicant is  
authorized 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 responsibility to inform (n)Code Solutions regarding the same.

Details of Authorized Signatory:

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

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

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

Signature of Authorized Person : \_\_\_\_\_  
(with stamp of Organization / Office)

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

Place : \_\_\_\_\_