

## Registration Certificate Manager

### DETAILS CERTIFICATE MANAGER

First Name(s)	
Surname	
Date of Birth, Place and Country	
Nationality	
Personal business email address	
Personal business telephone number	

### VERIFIED ID DOCUMENTS

Type of ID document	Passport	ID Card
Number ID document		
Expiry date ID document		

### DETAILS AUTHORISED REPRESENTATIVE

Organisation Name (legal entity)	
Trade Registry Number	
First Name(s)	
Surname	

### VERIFIED ID DOCUMENTS

Type of ID document	Passport	ID Card
Number ID document		
Expiry date ID document		

Certificate manager is authorised for	SSL (Copy ID)	EV SSL (F2F required)	QWAC (F2F required)
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By signing this form, I declare that the certificate manager is authorised to request, manage and revoke SSL, EV SSL and/or QWAC certificates (as indicated above) under the QuoVadis root until the revision, amendment or termination of this agreement.

Place	
Date (dd-mm-yyyy)	Signature <b>Certificate Manager</b>
Place	
Date (dd-mm-yyyy)	Signature <b>Authorised Representative</b>
Place	
Date (dd-mm-yyyy)	Signature <b>Registration Representative QuoVadis</b>
	Name QV Representative