QUALIFIED ELECTRONIC CERTIFICATE (QES) APPLICATION FORM

TURKTRUST

CLIENT INFORMATION

ID NO. (PASSPORT NO.) : ☐☐☐☐☐☐☐☐☐☐☐

NAME : .....

SURNAME : .....

MOTHER'S MAIDEN SURNAME : .....

E-MAIL : .....

HOME PHONE : .....WORK PHONE : .....

MOBILE PHONE : ..... FAX : .....

CONTACT ADRESS : .....

(to be used for certificate delivery) .....

POSTAL CODE.....CITY ..... COUNTRY.....

OCCUPATION *(optional)* : .....

CERTIFICATE VALIDITY PERIOD 1 Year ☐

PRODUCT DEMAND : Smart Card ☐ Smart Card Reader ☐ PKI Token ☐

INVOICE INFORMATION

TAX AGENT : ..... TAX NO. : .....

COMMERCIAL COMPANY NAME : .....

INVOICE ADRESS : .....

.....

POSTAL CODE.....CITY ..... COUNTRY.....

SUPPLEMENTARY CLIENT INFORMATION FOR ORGANIZATIONAL APPLICATIONS

(Only for organizational applications)

COMPANY NAME : .....

ORGANIZATIONAL UNIT : .....

TITLE : .....

AUTHORIZED SIGNATURES OF COMPANY OFFICIALS

....

Date **Signature(s)**

I hereby accept that information I declare above is correct and complete.

....

Date **Client Signature**

NOT: For detailed information about TURKTRUST Qualified Electronic Certificate (QEC) application process, please visit our web site at the address http://www.turktrust.com.tr.

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