

IdenTrust Global Common (IGC) Trusted Agent Agreement



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IGC Trusted Agent

Instructions for the Applicant

Thank you for choosing IdenTrust Services, LLC ("IdenTrust"), a subsidiary of IdenTrust, Inc.

Pre-requisites for becoming an IGC Trusted Agent:

Authorization to become a Trusted Agent (TA) on behalf of your organization requires you to obtain an IGC | Medium Assurance | Software Storage certificate, or an IGC | Medium Assurance | Hardware Storage certificate. You may initiate an application by selecting one of the following:

- Healthcare Buying Community: https://www.identrust.com/my-buying-community/healthcare
- Government Buying Community: https://www.identrust.com/certificates/federal-state-and-local-agencies
- Personal & Professional Buying Community: https://www.identrust.com/my-buying-community/personal-and-professional

IGC Trusted Agent Agreement Form:

You must complete the IGC Trusted Agent Agreement Form by filling out all of the fields, then take the form to an officer in your Organization who is authorized to sign on behalf of the Organization, asserting to IdenTrust that you are an authorized representative of your Organization.

Send the original, "wet-signature" form to IdenTrust for processing.

IdenTrust Registration Department 5225 W. Wiley Post Way, Ste 450 Salt Lake City, UT 84116-2898

Approval to become a Trusted Agent:

Once the IGC Trusted Agent Agreement Form is received, you will be sent a training manual via e-mail. When you are ready and have retrieved your IGC Medium Assurance Software or IGC Medium Assurance Hardware certificate, a training call will be scheduled after which you will be granted the role of Trusted Agent for your organization and can begin performing those duties.

If you have questions during this process, you may send an email to: Registration@IdenTrust.com.

IGC Trusted Agent Agreement Form

Appointment as Trusted Agent:

Applicant warrants, represents and agrees that:

You warrant to IdenTrust that you have read the relevant provisions of the IGC CP and IdenTrust's IGC CPS and understand your obligations as described in those documents. As a Trusted Agent of IdenTrust, LLC, you will be performing a key role in the identification and authentication of Subscribers for IGC certificates. In the capacity as our Trusted Agent, you agree to do the following:

- Gather and record all subscriber registration data as required for the bulk load submission on the bulk load templates provided by IdenTrust.
- Complete the Business Agreement found in the bulk load templates. By checking the
 box, you attest that all applications contained in the template are for employees or other
 individuals affiliated with the business named on the Business Agreement who are
 authorized by the business to hold a certificate. This attestation is in accord with the
 Acknowledgement form the terms of this Acknowledgement are incorporated as part of
 the Bulk Submission Template and apply to all subscribers entered on the template.
- Ensure that each applicant receives a copy of the Instructions for Applicant: this provides information about the In-person Identification form and the responsibility to review and accept the subscriber agreement and policies.
- When performing the In-person Identification and signing the form, ensure that the applicant signs the form in your presence, and presents the required identification credentials as stated in the In-person Identification by Trusted Agent form.
- When the In-person Identification is performed by a Notary, ensure that the In-person Identification by Notary form has been completed correctly including required signatures, information and required identification credentials.
- Forward the following to IdenTrust; the Bulk Load template and for each subscriber a completed In-person Identification form, either by Notary or by Trusted Agent.
- Supply the appropriate Human Resource Department(s) in your organization with the provided Instruction Form to ensure that IdenTrust is notified in the event of certificate

revocation events, such as separation of subscriber from your organization. Irrespective of the place of performance, this Trusted Agent Agreement shall be constructed, interpreted, and enforced in accordance with the substantive laws of the State of Utah, without regard to its conflicts of law principles.

Name of the Subscriber	Name of Subscribing Organization
Subscriber email address	By: (Signature of organization officer/authorized representative)
Address of Subscribing Organization	Name:
Address line 2	Title:
City, State/Province, Postal Code	 Date: