

**Authorization Form  
Administrative Services Certificate**

**Instructions to Applicant for an Administrative Services Certificate**

**Please Note: before IdenTrust, Inc (IDT) accepts this Administrative Services Certificate Application, Your Organization must have entered into a Certificate Coordinator Agreement or Registration Authority Agreement with IDT**

IDT will issue You an Administrative Services Certificate allowing You to engage in secure communications with IDT only after IDT has received this Authorization Form signed by You and Your Organization that indicates that You, "the Applicant," are authorized to hold and manage the Public/Private Key Pair that will be associated with the Administrative Services Certificate.

To complete your enrollment and receive your Administrative Services Certificate, you must complete remaining informational sections on the Form and have the form signed by You and the person designated by Your Organization as authorized to indicate that You are duly-authorized as a representative ("Authorizing Official")

Make a copy of the Form and make sure Your Organization (e.g., the Authorizing Official) keeps a copy of it for its records;

Send the signed original to IDT to:

CC/LRA Registration  
IdenTrust, Inc.  
5225 Wiley Post Way, Suite 450  
Salt Lake City, UT 84116-2898  
United States

If you have any questions during the enrollment process, please e-mail them to [Support@IdenTrust.com](mailto:Support@IdenTrust.com) or call 1-888-248-4447.

**Authorization Form**

THIS AUTHORIZATION is given by "Organization," identified below, to "Applicant," identified below, and to IdenTrust, Inc. ("IDT"), a Utah corporation and Certification Authority with its principal place of business at 5225 Wiley Post Way, Suite 450, Salt Lake City, UT 84116-2898 (<http://www.identrust.com>).

**1. Authorizations.** Organization gives the following authorizations: (a) DST is authorized to issue an Administrative Services Certificate and deliver it to "Applicant," and (b) Applicant is authorized to act as an agent of Organization in accordance with the terms of the Certificate Production Services Agreement previously agreed between IDT and Organization and the certificate policy statement referred to in that agreement as the "IDT OID" (together, the "Organization's Agreement") and to communicate with IDT regarding the management of Keys and Certificates in accordance with such Agreement ("Organization's Certificates"). IDT and Organization agree that to the extent of any inconsistency between this Authorization Form and the Organization's Agreement, the Organization's Agreement will prevail.

**2. Organization and Applicant warrant, represent and agree that:**

(a) Applicant has the association or relationship, identified below, with Organization and is duly-authorized by Organization to act on behalf of Organization: (i) to manage the Administrative Services Certificate issued by IDT and its associated Public/Private Key Pair, and (ii) to engage in communications with IDT regarding Organization's Certificates and provide instructions to IDT using the Public/Private Key Pair corresponding to the Administrative Services Certificate;

(b) Organization and Applicant have read, understood, and agreed to the responsibilities associated with subscribing to an Administrative Services Certificate, as specified in the Organization's Agreement

(c) The Applicant's Public/Private Key Pair will be used by Applicant only for purposes that are authorized and in accordance with the Organization's Agreement;

(d) Organization and Applicant will make reasonable efforts to protect the Private Key at all times;

(e) Organization shall ensure that Applicant is advised of the responsibilities of Private Key safekeeping and the consequences that can accompany the improper use or disclosure of the Private Key (e.g., unauthorized Key Recovery, Revocation of Certificates, etc.); and

(f) All facts and information provided to IDT by Organization and Applicant have been and will be accurate, current and complete and that Organization and Applicant will immediately notify IDT and request that the Certificate be revoked if: (1) Organization or Applicant suspects any loss, disclosure, or other compromise of Applicant's Private Key; (2) information contained in the Certificate is no longer accurate or current; or (3) the Applicant or the Private Key is no longer used by, associated with or authorized to be used by Organization.

**APPLICANT**

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
(DATE)

\_\_\_\_\_  
(PRINTED NAME)

\_\_\_\_\_  
(APPLICANT'S TITLE)

\_\_\_\_\_  
(APPLICANT'S EMAIL)

**ORGANIZATION**

\_\_\_\_\_  
(ORGANIZATION NAME)

\_\_\_\_\_  
(MAILING ADDRESS)

\_\_\_\_\_  
(MAIN TELEPHONE)

**AUTHORIZING OFFICIAL**

\_\_\_\_\_  
(NAME)

\_\_\_\_\_  
(MAILING ADDRESS)

\_\_\_\_\_  
(MAIN TELEPHONE)

\_\_\_\_\_  
(EMAIL)

**AUTHORIZING OFFICIAL**

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
(DATE)

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(PRINTED NAME)

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(CONTRACT ID)

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