

## SWITCHpki User Certificate Application Form

### Certificate Holder Details and Certificate Properties

**First name(s)** .....  
**Last name** .....  
**E-mail address(es)** .....  
**Organisation name** .....  
**Validity end date**  default (date of issuance + 3 years)  
 other: ..... (YYYY-MM-DD, max. 3 years)

### Certificate Holder Additional Details (required; will *not* appear in the certificate)

**Primary phone number** .....  
**Passport / government ID country of issue** .....  
**Passport / government ID number** .....  
**Passport / government ID expiry date** ..... (YYYY-MM-DD)

By submitting this certificate application I confirm that:

- all declarations made in relation to the information to be included in the certificate are true and accurate
- no personal data is used for the creation of the password
- the private key will be securely stored separate from the corresponding password
- I will not grant access to the private key to any unauthorised person
- the certificate will be used strictly in compliance with the terms and conditions of the relevant
  - Certificate Policy / Certification Practice Statement (CP/CPS)
  - the QuoVadis certificate holder agreement
  - and the WISEKey QuoVadis Privacy Notice – Digital Certificates and Signing Solution
 These documents can be downloaded in their latest version on <http://www.quovadisglobal.com/repository>
- the certificate will immediately be declared invalid if the certificate details are no longer correct or the private key is lost, stolen, or potentially compromised
- I agree with the publication of the certificate

Place, date .....

Signature of applicant .....

### For the Registration Authority (RA)

*I confirm the Certificate Holder's affiliation with the organisation indicated above and attest to the accuracy of the Certificate Holder details above, which have been checked to a nationally recognized identity document.*

Place, date .....

Name of authorized RA operator .....

Signature .....

Please send this form, together with the copy of ID document, to SWITCH, SWITCHpki RA, Postfach, 8021 Zürich. Alternatively, scans of the form and the ID document may be electronically submitted to pki@switch.ch (PDF document scans, with the duty of the local Registration Authority to keep an archive with the original paper copies).