(To be printed on Organization Letterhead with duly Sign and Stamp by the authorize person)

Identity Proof issued by Organization

Date:

To, VSign CA 2nd Floor, Bhavna Building, V.S. Marg, Prabhadevi, Mumbai – 400025

Name of the Employee (Applicant)	
Designation of the Employee	
(Applicant)	Affix Employee Photo
Identity Details of the Employee (Applicant)(Employee ID)	
Department of the Employee (Applicant)	(Signature of the Employee)

I hereby certify the identity of the above individual and issue this letter to him on behalf of the organization.

(Sign and Seal)

Name of the Issuer: Designation of the Issuer: Mobile Number: