

DIGI-SIGN CERTIFICATION SERVICES LIMITED REVOCATION REQUEST FORM OF ORGANIZATIONAL (REMOTE) ID-CERT CLASS 15 電子核證服務有限公司

請求撤銷機構(遠程)ID-Cert類別十五申請表

Organization Name: 機構名稱:		
Name of Authorized Representative: 機構授權代表姓名:		
ID No. or Passport No.: 身份證 / 護照號碼:		
Contact Phone No.: 聯絡電話:		
Contact Email Address: 供聯絡之電郵地址:		
Name of Authorized User of the ID-CID-Cert 證書的授權用戶姓名:	Cert:	
ID-Cert Serial No: ID-Cert 證書編號:		
We would like to revoke our Organiza 我們欲撤銷本機構之機構(遠程)ID-Ce		5
Reasons for Revocation: 撤銷原因:		
Digi-Sign will send an email confirming the 當證書撤銷後,撤銷確認書將會發送		s been revoked.
IMPORTANT NOTES:		
delivered to Digi-Sign office. If Authorize	d Representative digitally signs the sign.com. Digi-Sign will not process	ive. The original revocation form must be request form by Personal (Remote) ID-Cers requests by subscribers to revoke an ID-7-8833.
Digi-Sign office address:		
DIGI-SIGN CERTIFICATION SERVICES LIM	ITED	
11/F & 12/F Tower B, Regent Centre,		
63 Wo Yi Hop Road, Kwai Chung, Hong Kong		
重要啟示:		
	邓此表格至hotline@dg-sign.com。本	務辦公室。如機構授權代表使用個人(遠程) 公司不會處理來電或傳真要求撤銷 ID-Cert
電子核證辦公室地址: 電子核證服務有限公司 香港葵涌和宜合道63號麗晶中心 B座11及12樓		
Signature of Authorized Representative	Date	
with Organization Chop 機構授權代表簽署及機構蓋章	日期	
For Internal Use Only	W. W. 11. D.C.	In char
Request No Revocation / Suspension	Handled by RC	Approved By CRAM

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