**Application for registration in**

**the list of** means **for creating a qualified electronic signature**

**or a qualified electronic seal**

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| **Information about request applicant -** **qualified trust service provider** |
| Full name of the applicant of the request and the SIN of the subject |  |
| Headquarters of applicant (street and number, place, postal number and country) |  |
| **Request information** |
| 1. Registration2. Change 3. Deletion |
| **Data on the means - subject of the request for registration in the list** |
| Name of the manufacturer of the means for creating a qualified electronic signature |  |
| Name of the manufacturer of the means for creating a qualified electronic seal |  |
| Data on the importer of the means for creating a qualified electronic signature |  |
| Data on the importer of the means for creating a qualified electronic seal |  |
| Description and name of the means for creating a qualified electronic signature |  |
| Description and name of the means for creating a qualified electronic seal |  |
| **Data on conformity of the means - subject of the request for registration in the list** |
| Name of the laboratory for assessing the conformity of the means for creating the qualified electronic signature or qualified electronic seal |  |
| Data on the certificate of conformity of the means, ie date and number of the issued certificate of conformity of the means |  |
| Certificate of confirmation of means conformity assessment (standards met by the means",) |  |