

GUIDELINES TO FILL OXIRAIL REGISTRATION FORM

A – Registration form for Digital Certificate

(Class – 3 Form)

- 1) Form to be filled **legibly in English** using **ONLY BLUE INK**.
- 2) The **applicant name** should be the **same as mentioned in the PAN card**.
- 3) **Email ID**, which needs to be registered at IRCTC, needs to be unique. It should **have been never been used at any of the IRCTC sites before**.
- 4) **Mobile Number**, which needs to be registered at IRCTC, needs to be unique. The mobile number must be **registered with the operator in the name of the applicant only**.
- 5) Address of residence should be as per KYC documents attached.
- 6) **Signature on the form** must **exactly match** with the **signature on the PAN Card**.
- 7) A Gazetted Officer or Bank Manager or Post Master should attest all supporting documents. **Name, designation, office address and contact number of the attesting officer should clearly be visible on the form**.
- 8) Incomplete forms are liable to be rejected. The rejected forms will be physically discarded after 15 days from the date of rejection. No communication will be entertained with respect to rejected forms after the rejection period.
- 9) **Use of whitener, over-writing or any type of cutting is not permitted** on the form.

B – Oxygen IRCTC Registration form

- 1) RO code to be mentioned clearly on the form.
- 2) Address proof being submitted should be of the location from where business is being operated.
- 3) Address of Residence and address of Business to be mentioned separately and clearly.
- 4) MAC ID / BIOS NO / HDD NO of computer system which will be used for the purpose of ticket booking is to be provided.
- 5) Fill out the form **CLEARLY AND COMPLETELY**.



MOBILE WALLET | MONEY TRANSFER | DIGITAL PAYMENTS

IRCTC REGISTRATION FORM

Photo

RO Code: Existing IRCTC login ID:

Company Name:

Owner Name:

First Name

Middle Name

Last Name

Marital Status: Single Married:

Mobile No.: (This no should not be registered with IRCTC Before)

Contact No.: (Residence)

E-mail ID : (This E-mail ID should not be registered with IRCTC Before)

Machine ID / HDD ID/BIOS Serial no: (Physical ID of computer / Laptop)

SHOP ADDRESS (IRCTC agency required)

Name of Outlet/Shop:

Outlet Address:

City/Village: Tehsil:

District: Pin Code: State

PERMANENT ADDRESS

Outlet Address:

City/Village: Tehsil:

District: Pin Code: State

PAN Card No.: RMU Code: (if needs to be mapped under)

RMU Name:

Note: The above information should be complete. RO needs to submit following documents in electronic format to process the request for IRCTC registration.

1. Registration form for Digital Certificate
2. Photo (Recent Photograph) cross signed
3. Address Proof (For the same where he is taking the agency)
4. PAN Card copy

I hereby declare that above mentioned information is correct as per my knowledge and I shall take a full responsibility if found incorrect.

Name of the Person Place Date

Name & Signature (with seal)

Digital Signature Application Form - Individual



Fill using BLUE ink in Block letters

Class	<input type="checkbox"/> Class 1	<input type="checkbox"/> Class 2	<input type="checkbox"/> Class 3
Type	<input type="checkbox"/> Signature	<input type="checkbox"/> Encryption	<input type="checkbox"/> Combo

Validity
<input type="checkbox"/> 1 Year <input type="checkbox"/> 2 Years <input type="checkbox"/> 3 Years

Application ID

Applicant Information

Name: _____

PAN: _____ Mobile: _____

Date Of Birth: ____ / ____ / ____ Gender: _____

Address: _____

City: _____ State: _____ Pincode: _____

Email ID: _____

Affix Passport Size Photo

Cross Signature

Document Proof

All supporting documents should be attested by Gazetted Officer or Bank Manager or Post Master and the name, designation, office address and contact number of the Attesting Officer should be clearly visible.

ID Proof

- Passport PAN Card of applicant (Mandatory if PAN provided) Driving License Post Office ID Card
- Bank Account Passbook containing the photograph of the applicant and signed by the concerned Bank official
- Photo ID card issued by the Ministry of Home Affairs of Central / State Government
- Any Government issued photo ID card bearing the signature of the individual

Address Proof

- Aadhaar Card Voter ID Card Driving License (DL) / Registration Certificate (RC). Passport
- Telephone Bill (Not older than 3 Months) Water Bill (Not older than 3 Months) Electricity Bill (Not older than 3 Months)
- Gas Connection / Bill (Not older than 3 Months) Bank Statements attested by the bank (Not older than 3 Months)
- Property Tax / Corporation / Municipal Corporation Receipt

Information for GST Invoice

Same as Above GSTIN: _____

Billing Name: _____

Billing Address: _____ State: _____

PAN / Aadhaar Declaration

Filled only if applicant does not have both PAN and Aadhaar

- I hereby declare that neither PAN nor Aadhaar Number has been issued to me.

Date : _____ Applicant's Signature

Declaration by Applicant

- I have read, understood & agree to the terms & conditions mentioned in the VSign CPS & the subscriber agreement.
- I confirm that the information provided by me in the digital signature application form is correct. I am aware that Section 71 of the IT act stipulates that if anyone makes a misrepresentation or suppresses any material fact from the CCA or CA for obtaining any DSC, such person shall be punishable with imprisonment up to 2 years or with fine up to one lakh rupees or with both.

Date: _____

Place: _____

Applicant's Signature

RA Declaration

I declare that the information entered on VSign portal is as per the application form and documents submitted by the subscriber.

Date : _____

RA Code : _____

Registration Authority Signature & Seal

RO ENROLLMENT FORM



MOBILE WALLET | MONEY TRANSFER | DIGITAL PAYMENTS

Photo

Oxi Shaan Oxi Smart+ Web Mobile Oxi Rail Oxi Connect SBI CSP RBL CSP ICICI CSP

RO Code: _____ CSP Code: _____
 Link Branch Code: _____ Link Branch Name: _____

1. PERSONAL

Full Name: _____ Date of Birth: Gender: Male Female

SHOP ADDRESS

Name of Outlet/Shop: _____
 Outlet Address: _____
 City/Village: _____ Tehsil: _____ District: _____
 Pin Code: _____ State: _____ Registered Mobile No.: _____
 STD Code: _____ Tel.: _____ E-mail ID: _____ Doing Business Since: _____

PERMANENT ADDRESS

Address: _____
 City/Village: _____ Tehsil: _____
 District: _____ Pin Code: _____
 State: _____ Stay in the Village/Town Since: _____
 Registered Mobile No.: _____ STD Code: _____ Tel.: _____

KYC DOCUMENTS

Accepted Address Proof: Aadhaar Voter ID Ration Card Driving License Passport ID No. _____
 Accepted Identity Proof: Aadhaar Voter ID Pan Card Ration Card Driving License Passport ID No. _____

*KYC-As part of KYC Procedures, attach self attested photocopies of identity, Address & Establishment Proofs.

2. NATURE OF BUSINESS

Telecom Shop Medical Fancy Store Stationary Kirana (Grocery)

3. PAYMENT DETAILS

Payment via (tick any one): DD NEFT Other If other, please specify.....
 In favour of: **Oxygen Services India Pvt. Ltd.** Amount: (₹) _____ (in words) _____
 Drawn on: _____ Date:
 DD/Cheque No./NEFT/RTGS/Transaction ID: _____
 Bank & Branch: _____

4. YOUR BANK DETAILS

Bank Name: _____ A/c No.: _____
 Branch: _____ Branch Code: _____ City: _____
 Nature of Account: Savings Account Current Account Held for: _____ Years: _____

5. RO DECLARATION

- I have read and understood the terms & conditions provided with the form and I agree to all the terms and conditions listed on the Oxygen Retailers' website. (www.myoxygen.com/ro-termsandconditions.php). I accept these as binding on me and received copy of T&C.
- I have been provided a copy of the detailed terms & conditions as well.
- I have understood all particulars of the investment plan chosen by me, trading process, margins and related terms & conditions at which services are provided by OSI as applicable on this date and as amended from time to time.
- I confirm that the information(s) & particulars supplied by me are correct in all respects.
- I hereby declare that I do not have a Criminal record.
- I hereby agree, to open an Oxygen mobile wallet, along with the KYC documents submitted with this form, on my registered Mobile Number

RO Stamp

Name & Signature (with seal)

Name of Person: _____ Designation: _____ Date:

6. RMU/ OXIGEN EMPLOYEE DECLARATION (FOR DIRECT RO)

Acquired By: RMU Direct

I hereby confirm that this form was signed by the RO in my presence and
 I have physically seen and verified the document(s) attached here with their respective original(s).

RMU Name/Oxygen Employee: _____ RMU/Employee Code: _____
 Name & Signature (with seal)

Note : *Address Proof should match with either Retail Outlet Address or Permanent Address

*Retailer should sign on all the pages of ROE form with rubber stamp