

Attachment 2**CAPS - CERTIFICATE ADMINISTRATION AND IDENTIFICATION FORM**

CLIENT'S (PARTNER'S) NAME	
CAPS PARTNER ID (in case of new client please keep it blank)	

I. DELIVERY OF THE ELECTRONIC (HIGH SECURITY) CERTIFICATES

The certificate files required to access the CAPS system will be delivered by email (as a password-secured attachment.) The password will be sent via SMS to the given mobile phone number(s).
(The certificates will be issued per client instead of per individual user.)

Please determine the email address and phone number to receive the certificates and the password:

Email:

Mobile phone number:

Place, Date:,

.....
Authorised signature