



### STQC IT CERTIFICATION SERVICES

Application No.

(To be given by STQC)

#### **Application Form for FRR Testing of FPS/IRIS (Discrete/Integrated) Authentication Devices**

(To be filled separately for each type of device)

1.	a) Name & Address of Supplier/ Vendor Tel No./Mobile No./Fax: b) Contact Person Details: Name & Designation: Tel.No./Fax: Mobile No: Email:	
2.	Name and Address of Device Manufacturing Organization (OEM) Tel.No./Fax: Mobile No: Email:	
3.	Description of the Device: a). Nomenclature: b). Model No.: c). Make / Brand: d). Sensor Reference No: e). Extractor/Encoder No: f). Version No: g). Details of five critical components to be specified in case of Integrated device: h). Serial Number of Devices (Eight No.): Note: Serial No. of all 8 devices to be provided before start of FRR testing	
4.	Compliance w.r.t. UIDAI specification – Undertaking	(YES / NO)
5.	Authentication Infrastructure Requirements a). Laptop b). Client application for authentication c). Software Drivers d). Accessories Required e). Operators f). Extension board with spike buster	
6.	Technical Brochure of Device	



7.	<p>Testing Fee: (Non Refundable) – Rs. 5,00,000/- + GST (18%)</p> <p><b>Details for payment:</b> The payment should be done through RTGS/NEFT <b>Beneficiary: C-DAC, Mumbai</b> <b>Address:</b> Gulmohar Cross Road No.9, Juhu, Mumbai – 400049.</p> <p>Authorised contact persons (for sending transactions messages) <b>Name:</b> Mr. Tushar P. Koli (Mobile No.: 9773739193) <b>Email ID:</b> tushar@cdac.in / <a href="mailto:accounts-mumbai@cdac.in">accounts- mumbai@cdac.in</a> <b>Beneficiary's Bank Name:</b> Central Bank of India <b>Address:</b> Sheetal Smruti, Plot No.4, Swastik Society, 1st Floor, JVPD Scheme, Vile Parle (W), Mumbai 400 056. <b>Tel:</b> 022-26182603 <b>Beneficiary's Bank A/c type :</b> Savings Bank Account <b>Beneficiary's Bank A/c Number:</b> 3174900206 <b>MICR Code of the Bank branch:</b> 400016028 <b>IFSC Code of the bank for RTGS/NEFT Transfer:</b> CBIN0281621 <b>Income-tax PAN Number:</b> AAATC0934H <b>GSTIN:</b> 27AAATC0934H1Z0</p>	
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**Declaration:**

I will abide by Rules & Procedures of Certification Body.

I will be responsible for Network Connectivity / Data cards at the time of field FRR testing.

I declare that all the information provided by me above is correct to the best of my belief.

Authorised Signatory