Application form for eDelivery PKI certificates

1.) Organisation Requesting the Certificate

a) Identity:

Organisation (in English): The Centre of Registers and Information Systems

VAT Number (mandatory for private companies): EE100523377

Link to verify the VAT number: https://ariregister.rik.ee/eng/company/70000310

Please note: The company name must correspond exactly to the field O = organization name / company name in the certificate.

b) Address:

Street / House number: Lubja 4

Zip code / City (locality): 19081, Tallinn

Country: Estonia

c) Authorised representative:

Given name / Surname: Sven Heil

Function: Director

2.) Scope

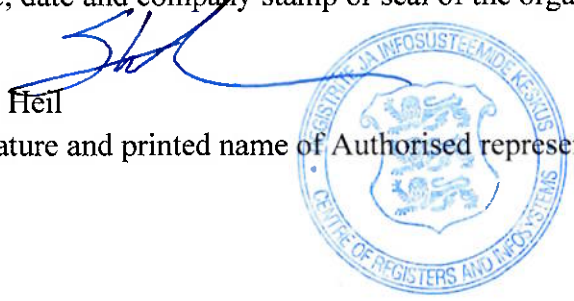
On behalf of the above Organisation, I request and authorize the European Commission to manage renew X.509v3 certificates and the associated material that is provided to and by the CommisSign-2 PKI service.

Terms and Conditions

On behalf of the above Organisation, I undertake to comply with the terms of use of the eDelivery PKI Service (Terms and Conditions of the eDelivery PKI Service on https://ec.europa.eu/digital-building-blocks/wikis/display/DIGITAL/PKI+Service), and regulations of the Certificate Policy/ Certificate Practice Statement (CPS) of CommisSign-2 PKI (https://commissign.pki.ec.europa.eu/info/cp/CPS.pdf).

3.) Signature of Authorised representative

Tallinn, 17.09.2026
Place, date and company stamp or seal of the organisation



Sven Heil
Signature and printed name of Authorised representative