CAcert Organisation Assurance Programme COAP form

CAcert is an international organisation. The English language is chosen to be the formal language. For your convenience a translation to Dutch is provided here in *italic*. The translation is to be considered a help only. English remains the ruling language.

CAcert is een internationale organisatie. Engels is de gevoerde taal binnen de organisatie. Als hulp is hier een vertaling in het Nederlands bijgevoegd (cursief). De vertaling dient als hulp. De Engelse tekst is bindend.

Applicant (*Aanvrager*)

Name of the Organisation *(Naam van de Organisatie)*	
Contact email address *(Contact email adres)*	
City (Vestigingsplaats)	
State (Provincie)	
Country (Land)	
email(s) of administrator accounts - must match a CAcert account (CAcert Account email adres(sen) van de systeem administrateur)	
Domain(s) *(domein-naan (-namen))*	

As proof for the legality, identity and legality of signatures for the organisation the following official documents, either original or in certified copies and not older as 4 weeks, are attached to this form.

De volgende bewijstukken voor de officiele naam van de Organisatie, haar rechtsform en de namen van de tekenbevoegden zijn de volgende originelen of gewaarmerkte copien niet ouder dan 4 weken, zijn bijgevoegd:

I have read, understood and agree to the terms of the CAcert Community Agreement URL: http://svn.cacert.org/CAcert/CACommunityAgreement.html.

The Assured Organisation, the Organisation Assurer handling this request and other related Parties are bound into CAcert's jurisdiction and dispute resolution.

Ik verklaar de CAcert Community Agreement gelezen te hebben en met deze Agreement in te stemmen. De gewaarmerkte Organisatie, de Organisatie Assurer (waarmerker) die dit verzoek behandelt, en de overige partijen zijn gebonden binnen de jurisdictie (NSW Australie) van CAcert Inc. en de CAcert geschilafhandeling.

I agree (full name, initials) */ Ik ga accoord (volledige naam, initialen)*

Hereby I declare that all provided information is complete and accurate and request from the Organisation Assurer to verify the Organisation according to the Organisation Assurance Policy. I agree that CAcert keeps the provided informations both physically and electronically. In addition we request to grant administration privileges to the administration accounts listed above.

Hierbij verklaar ik dat alle bijgesloten informatie volledig en waarheidsgetrouw is volgens de richtlijnen van de Organisatie Assurance Policy (Cacert organisatie waarmerkingsbeleids documenten). Ik ga hierbij accoord dat de bijgevoegde (zowel fysiek als wel electronisch) informatie door CAcert bewaard mag worden. Tevens verzoek ik dat de systeemadminstrator toegang wordt verschaft tot de voornoemde CAcert Organisatie registratieaccount.

City & Date (yyyy-mm-dd) _____
Plaats & Datum (jjjj-mm-dd)

_____ _____
Signature / Handtekening Organisation seal / *Organisatiestempel*

Organisation Assurer only / *Alleen voor de Organisatie Waarmerker.*

The provided information on this form is correct and have been validated by the denotated sources and to the following sub-policies.

De informatie in het formulier is correct en is gecheckt op waarheid zoals bij bijgaande beschreven bronnen. Zij volgen de CAcert sub-policies voor Organisatie Waarmerking voor Nederland:

City & Date (yyyy-mm-dd) _____
Plaats en Datum ((jjjj-mm-dd)

Signature / Handtekening
Organisation Assurer _____

CAcert Assurance Programme
Identity Verification Form (CAP form)

CAcert Inc. - P.O. Box 81 - Banksia NSW 2216 - Australia - http://www.CAcert.org

CAcert's Root Certificate fingerprints: A6:1B:37:5E:39:0D:9C:36:54:EE:BD:20:31:46:1F:6B and 135C EC36 F49C B8E9 3B1A B270 CD80 8846 76CE 8F33

To the Assurer: The CAcert Assurance Programme (CAP) aims to verify the identities of Internet users through face-to-face witnessing of government issued identity documents. The Applicant asks you to verify to CAcert.org that you have met them and verified their identity against one or more original, trusted, government photo identity documents.
If you have ANY doubts or concerns about the Applicant's identity, DO NOT COMPLETE OR SIGN this form. For more information about the CAcert Assurance Programme, please visit: http://www.CAcert.org As the assurer, you are required to keep the signed document on file for 7 years. Should CAcert Inc. have any concerns about a meeting taking place, CAcert Inc. can request proof, in the form of this signed document, to ensure the process is being followed correctly. After 7 years if you wish to dispose of this form it's preferred that you shred and burn it. You do not need to retain copies of ID at all. It's encouraged that you tear the top of this form off and give it to the person you are assuring as a reminder to sign up, and as a side benefit the tear off section also contains a method of offline verification of our fingerprints.

Applicant's Statement

Full Names:

Date of Birth: (YYYY-MM-DD)

Email Address:

I hereby confirm that the information stated above is both true and correct, and request the CAcert Assurer (identified below) to witness my identity in the CAcert Assurance Programme.

Make sure you have read the CAcert Community Agreement, see http://svn.cacert.org/CAcert/CACommunityAgreement.html

Date (yyyy-mm-dd): 20___-___-___

Applicant's signature:

CAcert Assurer

Assurer's Name:

Date (yyyy-mm-dd): 20___-___-___
Assurers signature:

Photo ID's shown:

❏ Passport ID ❏ Identification Card ID
❏ Driver License ID ❏ _____ Photo ID

Location of Face-to-face Meeting: _____

Points Allocated: _____ Notes: