



# CACert Assurance Programme Identity Verification Form

CACert Inc. - Hangar 10 Airfield Avenue - Murwillumbah NSW 2484 - Australia - <http://www.CACert.org>

CACert's Root Certificate fingerprints (since 2019)

SHA1: root: DDFC DA54 1E75 77AD DCA8 7E88 27A9 8A50 6032 52A5 and class3: A7C4 8FBE 6B02 6DBD 0EC1 B465 B88D D813 EE1D EFA0

SHA256: root: 07ED BD82 4A49 88CF EF42 15DA 20D4 8C2B 41D7 1529 D7C9 00F5 7092 6F27 7CC2 30C5 and class3: F687 3D70 D675 96C2 ACBA 3440 1E69 738B 5270 1DD6 AB06 B497 49BC 5515 0936 D544

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, including detailed guides for CACert Assurers, 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

|                                    |  |
|------------------------------------|--|
| <b>Names:</b>                      |  |
| <b>Date of Birth:</b> (YYYY-MM-DD) |  |
| <b>Email Address:</b>              |  |

I hereby confirm that the information stated above is both true and correct, and request the CACert Assurer (identified below) to verify me according to CACert Assurance Policy.

I agree to the CACert Community Agreement. ( <http://www.cacert.org/policy/CACertCommunityAgreement.html> )

Applicant's signature: \_\_\_\_\_

Date (YYYY-MM-DD): 20\_\_-\_\_-\_\_

## CACert Assurer

Assurer's Name: \_\_\_\_\_

Photo ID Shown: (ID types, not numbers. eg Drivers license, Passport)

1. \_\_\_\_\_
2. \_\_\_\_\_

Location of Face-to-face Meeting: \_\_\_\_\_

Points Allocated: \_\_\_\_\_

I, the Assurer, hereby confirm that I have verified the Member according to CACert Assurance Policy.

I am a CACert Community Member, have passed the Assurance Challenge, and have been assured with at least 100 Assurance Points.

Assurer's signature: \_\_\_\_\_

Date (YYYY-MM-DD): 20\_\_-\_\_-\_\_