



GlobalSign Request for Revocation Form

Version 1.2

PLEASE PRINT OUT THIS REQUEST FOR REVOCATION.

I declare that I want to revoke the following certificate:

Certificate Type:

Certificate Serial Number:

Name of the Organization:

Address of the Organization:

Postal Code and City:

Country:

VAT number (if applicable) of your organization:

Signature of a legal representative of the organization (as mentioned official documents proving the existence of your company), name and function, telephone number, e-mail address:

Name:

Title:

Telephone number:

E-mail address:

Signature:

Date:

PLEASE SEND THE REQUEST FOR REVOCATION PER FAX OR MAIL AT YOUR REGISTRATION AUTHORITY OR TO GLOBALSIGN :

GlobalSign – Revocation Department

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B-3001 Leuven - Belgium

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