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| **SCA Registration Form** | | | | | | | | | |
| Contact person Name | | |  | | | | | | |
| Designation | | |  | | | | | | |
| Contact No | | |  | | | | | | |
| Land Line No | | |  |  | | | | | |
| Email Id | | |  | | | | | | |
| Organisation Name | | |  | | | | | | |
| SCA ID | | |  | | | | | | |
| Location | | |  | | | | | | |
| Operating States | | |  | | | | | | |
| **Instruction for Registration** | | | | | | | | | |
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| 1. Please Fill the Registration form and sign the agreement and send it to infocscspv@cscegovindia.com. | | | | | | | | | |
| 2. Once the account is created, your userid and password alongwith the wallet Id will be emailed to you on the email you have provided. | | | | | | | | | |
| 3. Once you login you will be able to select which services you would like to offer through your VLE network. Further instructions for rendering services will be available online once you log-in. | | | | | | | | | |
| 4. For any additional questions or concerns please write to infocscspv@cscegovindia.com. | | | | | | | | | |