

**REQUEST FOR REVOCATION OF ELECTRONIC CERTIFICATE**

**DETAILS OF THE APPLICANT FOR REVOCATION**

NIF / NIE: \_\_\_\_\_  
Surname/s: \_\_\_\_\_  
Name: \_\_\_\_\_  
E-mail address: \_\_\_\_\_ @  
Mobile number: \_\_\_\_\_

**ENTITY' DATA** (only for electronic seal or electronic signature certificates with attribute of representation of ENTITY or corporate relationship with an ENTITY)

VAT NUMBER: \_\_\_\_\_  
Company name: \_\_\_\_\_

**QUALITY IN WHICH IT OPERATES**

- certificate holder
- Representative or person duly authorised by the ENTITY
- Other. Especificar: \_\_\_\_\_

**REQUESTS**

**TO SIGNATURIT SOLUTIONS SLU, THE REVOCATION OF THE FOLLOWING CERTIFICATE:**

**TYPE OF CERTIFICATE:**

- Citizen

**ISSUED TO:**

- in my name
- in the name of Mr./Ms. \_\_\_\_\_ with DNI /NIE \_\_\_\_\_  
being the ENTITY I represent authorised to request the revocation of the certificate
- in the name of the ENTITY I represent (electronic stamps)

**GROUND FOR REVOCATION**

- Incorrect certificate information
- Subsequent change in the data or circumstances stated on the certificate  
(e.g. termination of the relationship between the HOLDER and the ENTITY/SUBSCRIBER,  
revocation of Powers of Attorney)
- Loss or theft of the certificate or its keys
- Loss of control of the key activation data (PIN)
- Key compromise (loss of control of the private key or Activation Pin)
- Access to the holder's private key by an unauthorised third party
- Damaged card or token device
- Death of the holder
- Termination of the ENTITY
- Other (please specify): \_\_\_\_\_

**BY THIS REVOCATION ORDER I AM AWARE OF AND ACCEPT ALL THE CONSEQUENCES OF THIS REVOCATION, IN PARTICULAR ITS IRREVERSIBLE NATURE.**

### HOW TO APPLY

Submit this application using one of the following channels:

- send an email to [revocaciones@signaturit.com](mailto:revocaciones@signaturit.com) from the email address registered for the issuance of the certificate or from a corporate email of the ENTITY.  
If you use a different e-mail address, you must attach:
  - copy of the ID card of the person requesting the revocation
  - where applicable, a copy of the document accrediting the powers of representation of the HOLDER or the ENTITY
- to go to the External Registration Authority that has validated the certificate or to the SIGNATURIT Registration Authority itself: carrer d'Avila, nº29- 1º - 08005 BARCELONA

### LEGAL NOTICE AND CONSENT PRIVACY

The terms contained in this form have the meaning attributed to them in the Certification Practice Statement (or CP), the Certification Policies (or CPs) and in the General Terms and Conditions of SIGNATURIT's Electronic Certification Services, and in particular those relating to the CP of the requested profile (documents available at <https://policy.signaturit.com/>).

In compliance with current data protection regulations, the information you provide in order to complete your request will be processed under the following conditions:

#### Information about the processing of your personal data:

**Responsible:** SIGNATURIT SOLUTIONS, S.L.U., carrer d'Avila nº29, 1º - 08005 Barcelona - NIF B-66024167. SIGNATURIT is part of the SIGNATURIT Group.

**Purpose:** To provide the service related to the life cycle of the electronic certificate issued.

**Legitimate basis:** The execution of the contract for the provision of electronic certification services and the legal obligations imposed on Qualified Trust Service Providers according to Law 6/2020 and EU Regulation No. 910/2014.

**Exercise of rights:** You may exercise your rights of access, rectification, erasure, limitation of processing, portability and objection as explained in the IVNOSYS Privacy Policy or by contacting [dpo@signaturit.com](mailto:dpo@signaturit.com) or [soporte@signaturit.com](mailto:soporte@signaturit.com).

**Additional information:** You can consult the complete information on the processing of your personal data in the Privacy Policy published on the website: <https://www.signaturit.com/es/politica-privacidad/>.

The undersigned confirms the truthfulness and accuracy of the information provided in this form and, on that basis, signs this Application.

Date	Signature of Applicant