




CI Plus Registration Application

The information requested on this form and the referenced accompanying exhibit are required to apply for a new CI Plus Device Type.

CI Plus Licensee Details

Licensee Company Name	
Company Address	
Company Contact Name	
Company Contact Position	
Company Contact Phone Number	
Company Contact Email	
Type of Registration See note 5	<p>Normal Registration</p> <p>Test Center Confirmation signature required on page 6</p> <p>Host Self Registration</p> <p>Refer to clause 5.2 of the CI Plus Interim License Agreement</p>

Details of Device to be Registered

Device Type Name See notes 1 and 2	
Device Type See note 6	Host ECP Host Module  CI Plus 2nd Root (See Note 8) ECP Module MOST
Device Description	
Hardware Identification See note 3	
Software Version Tested	

Device Registration Declaration Information

Reference Date for Registration See Note 4	Enter date
Device is compliant with the CI Plus ECP Specification or CI Plus Specification See Note 9	CI Plus Specification Version
	CI Plus ECP Specification Version
Device is compliant with all applicable change notes as published by CI Plus LLP and in force on Reference Date	Yes No

Device is in compliance with Compliance Rules for Hosts, Modules or MOST as applicable See Note 11	Compliance Rules: Exhibit C/D/ECP_C Version
	Additional Compliance Rules for ECP CICAM Devices: Exhibit ECP_D Version
Device is in compliance with all applicable changes published by CI Plus LLP and in force on Reference Date	Yes No
Device is in compliance with the Robustness Rules for Host, Modules or MOST as applicable (See Note 10)	Exhibit B/ECP_B Version
Device is in compliance with all applicable changes published by CI Plus LLP and in force on Reference Date	Yes No
In case of a normal registration, the CI Plus Test Pass Confirmation Report is herewith provided and the CI Plus Robustness Certification Checklist provided herewith is identical to the one submitted to the CI Plus Authorized Test Partner	Yes No

<p>Two printed photographs of the tested device (one of front view of product and one of main Circuit Board implementing CI Plus functions) are herewith provided for filing by CI Plus LLP or agent acting on its behalf, which may be used by CI Plus LLP for investigation and auditing in case of failure of devices using the Device Type granted based on this Declaration in meeting the compliance or robustness.</p> <p>The Photographs should state clearly on the rear the Device Type they show and should be signed and dated by the same person acting as company signatory on this registration form, and will be countersigned by CI Plus Authorized Test Partner.</p>	<p>Yes</p> <p>No</p>
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Notes for previous tables

1. The Device Type Name is used for identification throughout the test, registration and certification process. It is used for:
 - a. documentation tracking, and audit trails
 - b. in the "Product Name" field in the Device Digital Certificate
 - c. on the Web Portal to identify Certificate types for purchase
2. The Device Type Name field is restricted to a length of 64 characters using the following printable characters:

'A'-Z', 'a'-z', '0'-9' ' () + , - . / : = ? and "space"
3. Hardware identification means the unique identifying mark, such as model name, prototype reference number, etc., able to be used by the Test Lab to identify such unique device.

If more than one sample is submitted to the Test Lab to facilitate parallel testing, the Licensee confirms that all samples are functionally identical and the Compliance and Robustness declaration applies to each sample.
4. This date defines the applicable versions of the CI Plus Specifications and Compliance Rules and Robustness Rules. The earliest date permitted is the date of submission for testing to a CI Plus Authorized Test Partner resulting in the accompanying Test Pass Confirmation Report in case of a normal Registration or the date of submission in case of a Host Self Registration.
5. Both Module and MOST devices are required to undertake Normal Registration and shall not choose "Host Self Registration"

6. Based on the Devices Type selected the device will be provisioned with the following Root of Trust:

Device Type (Select one only)	Root Of Trust	Optional Root of Trust	CI Plus 2nd Root Security Level extension
Host	CI Plus Root		
ECP Host	CI Plus Root & CI Plus 2nd Root		ECP
Module	CI Plus Root	CI Plus 2nd Root	Standard
ECP Module	CI Plus Root & CI Plus 2nd Root		ECP
MOST	CI Plus Root		
CI Plus Root (See Note 7)			
CI Plus 2nd Root (See Note 8)			

7. CI Plus Root is the Root of Trust based on the SHA-1 Hash algorithm.
8. CI Plus 2nd Root is the Root of Trust based on the SHA-256 Hash algorithm.
9. Specification version declaration: a CI Plus Devices shall provide the CI Plus Specification Version and a CI Plus ECP Device shall provide the CI Plus ECP Specification Version.
10. Robustness Rules version declaration, a CI Plus Device shall provide the Exhibit B Version and a CI Plus ECP Device shall provide the Exhibit ECP_B Version.
11. Compliance Rules version declaration: a CI Plus Host Device shall provide the Exhibit C Version; a CI Plus ECP Host Device shall provide the Exhibit ECP_C Version; a CI Plus Module Device shall provide the Exhibit D Version. A CI Plus ECP Module Device shall provide the Exhibit D Version and the Exhibit ECP_D Version.

Test Pass Confirmation Section

Approved Test Center Details (Not Applicable for Host Self Registration)

The approved Test Center is required to complete this section.

Company Name	
Test Center Reference Number Number allocated by Test Center for reference purposes	
Test Plan Version	
Submission Date of Device for this successful test	
CI Plus Robustness Certification Checklist or CI Plus Robustness Checklist for ECP Devices Inspected and found to provide adequate information	Yes No Exhibit G/ECP_G Version
Signature	
Name	
Date	

Submitting Company Signature Section

Signature	
Name	
Job Title	
Date	

The CI Plus Robustness Certification Checklist is herewith provided for filing by CI Plus LLP or agent acting on its behalf, and may be used by CI Plus LLP for investigation and auditing in case of failure of devices using the Device Type granted by this Registration to meet the Compliance Rules or Robustness Rules.

Please send the signed form and all applicable exhibits to:

DigiCert, Inc.
CI Plus Device Registration
Orion Building
Ballycoolin Business Park
Blanchardstown, Dublin 15

Alternatively a signed copy can be scanned and sent as an email attachment to:

ciplus@digicert.com

Reception/Filing Information

To be filled in by CI Plus LLP or designated Agent.

Test Report Verified	Yes
	No
Robustness Checklist Verified	Yes
	No

Signature	
Name	
Date of Receipt	