

REQUEST TO INVALIDATE A CERTIFICATE / CHANGE THE ADMINISTRATOR'S PASSWORD IN THE SKD

Name of line	To be completed by the administrator / cancelling person
Certificate invalidation ⁽²⁾	
Change of password	
Name of participant	
Code of participant	
Administrator login in the SKD ⁽³⁾	
DN of administrator certificate to be invalidated ⁽⁴⁾	
Requested date of invalidation ⁽⁵⁾	
Name and surname	

Date and time..... Signature of the cancelling person.....

Record of the SKD administrator

Date and time of receipt by the SKD administrator

Date and time of certificate invalidation

Notes:

- (1) The request is sent by the administrator to the SKD administrator.
- (2) A cross in the relevant field indicates whether certificate invalidation or change of password is requested.
- (3) The login name under which the administrator is registered in the SKD.
- (4) The certificate DN must be stated when requesting certificate invalidation if the administrator has more than one certificate registered in the SKD.
- (5) Date of cancelling must be stated only when requesting certificate invalidation.
- (6) The certificate may be cancelled by the administrator (only his own certificate), the participant's statutory body or the SKD administrator.