TeleTrusT Germany

The IT Security Association.

TTT OID Registration Authority
c/o Fraunhofer-Institut SIT
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Copy of TTT-OID RA / Applicant

Application Form for Object Identifier (OID) Assignment

1. Applicant

Name of Organisation:	
Address:	
Contact Partner:	
Tel.:	E-Mail:

2. Object, for which an OID is requested

Name of Object:
Precise Description (or reference to a precise description):
References (referenced documents to be attached):
Intended Usage:
Application Context (optional):
Suggested OID Branch:

The TeleTrusT OID assignment rules are known and accepted.

Stamp of Applicant´s Organisation Date ..... City .....

Signature(s) .....

OID Name
OID No

Stamp of TeleTrusT-OID Date ..... City .....

Signature(s) .....