

API consumption - External organization onboarding/change

This form is intended for the definition of an organization for the purpose of Luxembourg Government-provided APIs consumption by automated services running on private operators infrastructure, also known as M2M (machine to machine), and for the delegation of further API access requests to delegated representatives called Applications managers.

You may only use this form if you meet the following criteria :

* The form must be properly filled in and signed by an **official representative of the organization**, as defined in the **organization status** and/or referenced in the **Luxembourg Business Registers (RCS)** ;

* One form must be submitted for each new delegated Applications manager.

How to use this form :

You may either **digitally sign** this form (using LuxTrust) or **manually sign** it (in which case it must be forwarded along with a recto/verso copy of the ID documents of the official representative). It must then be sent to the appropriate team within CTIE/DSI : api.admins@ctie.etat.lu.

Note : The process is documented in "API Integration Guide - Use Case 2 - Business to Government (M2M aka. Server to Server)".

Organization

The following organization intends to introduce access requests to one or more Luxembourg Government-provided APIs :

Organization name* :

Type* :

Luxembourg National Register number (Matricule RNPM)* :

Luxembourg Business Registers number (RCS)* :

Address (street)* :

Address (number)* :

Address (city)* :

Address (post code)* :

Address (country)* :

Phone number (IT issues)* :

Email address (IT issues)* :

Applications managers (for API access)

Applications managers will use the API Gateway Portal to manage access to the APIs for which your organization will be authorized. At least one Applications manager must be a member of your organization.

Warning ! The mobile phone numbers and email addresses are mandatory and may be used for two-channel authentication when securely exchanging files with CTIE. Make sure to provide accurate information.

☐ Delegate Applications manager access to : ☐ Revoke access from :

First name* :

Last name* :

Job title* :

Matricule* :

Phone number* :

Email address* :

☐ Delegate Applications manager access to : ☐ Revoke access from :

First name :

Last name :

Job title :

Matricule :

Phone number :

Email address :

Official organization representative and signature

I hereby certify that I act as an official and authorized representative of the previously described organization, and that the provided information is complete and accurate. I understand that this information will be validated with the Luxembourg Business Registers as well as the Luxembourg National Register before enabling my organization and granting any API access. I understand that I have granted the delegated Applications managers (defined above) the ability to introduce APIs access requests on behalf of the organization and under my authority.

First name* :

Last name* :

Signature* :