

REQUEST FOR RECOGNITION OF FACILITY SECURITY CLEARANCE CERTIFICATE

I request recognition of the Facility Security Clearance Certificate issued to:

.....
(Company/Company Name/Full Name)

Registration Number.....

Registered Office /Place of Business / Address of Residence.....

Country:.....

For Access to Classified Information of the Level:

In reference to the Personnel Security Clearance Certificate No.:.....

Issued
(Name of the Issuing Authority and the State)

Date..... *Date of Expiry*..... *Classification Level*

Period of Validity of the Recognition:.....

Required form of access to Classified Information:.....

Reason for the Request (including specification of public procurement, concession agreement, contract or other facts, of the ordering party or the contracting authority, of circumstances justifying the form of access pursuant to the Section 20 of the Act, etc.).....

Mailing Address for Delivery of the Recognition of Facility Security Clearance Certificate:

Annex: Official translation of the Facility Security Clearance Certificate issued by foreign power, or its authenticated copy, or confirmation by the authority of foreign power, competent in classified information protection, that the applicant is holder of the submitted Certificate.

In..... *Date*

.....
Signature of the holder of the Facility Security Clearance Certificate, or of the person acting on behalf of a legal body, or a responsible officer of the authority of foreign power competent in classified information protection.