CCM-03-A Form 18

Notification of Contact for Inquiries and Information on List of Evaluation Facilities

Date :\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To General Manager of IT Security Technology Evaluation Department

IT Security Center

Information-technology Promotion Agency, Japan

Name of the Applicant :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person in charge of the application :

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (*Signature*)

Title/Department :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The applicant hereby submits notification of contact for inquiries and information to be included on the list of Evaluation Facilities as follows.

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| Evaluation Facility | Approval Number |  ITEF\_\_\_\_\_\_\_\_\_\_\_ |
| Name |  |
| Responsible Manager of the Evaluation Facility | Department, Title : Name : 　　 E-mail : Telephone : 　 　 |
| Quality Manager | Department, Title : Name : 　　 E-mail : Telephone : 　 　 |
| Technical Manager | Department, Title : Name : 　　 E-mail : Telephone : 　 　  |
| Deputy Technical Manager | Department, Title : Name : 　　 E-mail : Telephone : 　 　 |
| Document Management Manger | Department, Title : Name : 　　 E-mail : Telephone : 　 　 |

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| Information Included on the List of Evaluation Facilities (Japanese version) |
| Point of Contact(Name of contact person) |  |
| E-mail |  |
| Address | 〒 |
| Telephone |  |
| URL of the Evaluation Facility |  |

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| Information Included on the List of Evaluation Facilities (English version) |
| Point of Contact(Name of contact person) | Contact |  |
| E-mail | E-mail |  |
| Address | Address |  |
| Telephone | Tel |  |
| URL of the Evaluation Facility | URL |  |