CCM-02-A Form 7

Request for Withdrawal of Application

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

To Commissioner SAITO Yutaka

Information-technology Promotion Agency, Japan

Name of the applicant : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Name of the person responsible for the application :

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

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

This is to give notice that the applicant is withdrawing the following application for the reason mentioned in 3 below.

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| 1. Type of application(select either one)  | ( ) Application for Certification ( ) Application for Maintenance( ) Application for Re-assessment |
| 2. TOE/PP name : |  |
| Reception number : |  |
| 3. Reason for withdrawal : |
| Person in charge of application (department) : Contact information (postal code, address, telephone, e-mail) : |