CCM-03-A Form 6

Notification of Termination of Evaluation Services as an Evaluator

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

To Commissioner SAITO Yutaka

Information-technology Promotion Agency, Japan

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

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

Person responsible for the application:

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

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

Pursuant to "Requirements for Approval of IT Security Evaluation Facility (CCM-03)", the applicant hereby submits a notification of termination of evaluation services as an evaluator.

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| --- | --- | --- |
| Evaluation Facility | Approval Number |   |
| Name |   |
| Evaluator | Registration Number |   |
| Name |   |
| Effective Date of Termination | Date: / /  |
| Impact of the Evaluator’s Termination of the scope of Assurance Components for which the Evaluation Facility is approved | ( ) None ( ) Yes (fill in details) |