CCM-03-A Form 9

Request for Reissuing Certificate of Approval of Evaluator Qualification

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

To Commissioner SAITO Yutaka

Information-technology Promotion Agency, Japan

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

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

Person responsible for the application :

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

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

The applicant hereby applies for reissuing the Certificate of Approval of Evaluator Qualification for the reason stated in the item 2 below.

|  |  |  |
| --- | --- | --- |
| 1. Evaluator | Registration Number |  |
| Name |  |
| 2. Reason for Requesting a Reissue |  | |

Note: If this Request for Reissuing is accompanied by the changes to the name or address (including relocations or addressing system changes) of an Evaluation Facility, additional documents shall be submitted. (Please refer to CCM-03-A)