# APPLICATION TO SUB-CONTRACT OR COLLABORATE ON PROTECTIVELY MARKED (CLASSIFIED) WORK

#### PART 1

A	From: full name and address of contractor submitting a	pplication	
	Telephone no:		
В	This application concerns: (tick appropriate box)		
1	A sub-contractor in the United Kingdom		Complete Parts 1, 2 & 3
2	A sub-contractor in overseas		Complete Parts 1, C and D, Part 3
3	A pre-contract collaboration/teaming agreement with overseas contractor		Complete Parts 1, C, Part 3
С	From: full name and address of selected company		
D	Full name and address of selected manufacturer (if diff	erent from	(C)
Е	Registration no. of the company & VAT no.:		
E	Reg No:		
	VAT No:		
F	Names under which the company has previously traded	l (if applic	able):
1			

## **RESTRICTED** (WHEN COMPLETED)

G	Full name, address, registration and VAT no. of parent and/o	
Н	shares or loan capital.	any holding more than one fifth of the paid up shares, preference
I	Date of formation of business and brief history:	
J	Representative(s) (maximum of two) of sub-contractor with	whom proposed work has been/will be discussed:
	Full name:	Full name:
	AA number (if known):	AA number (if known):
	Position in company:	Position in company:

## **RESTRICTED** (WHEN COMPLETED)

#### PART 2

K Please provide in the boxes below details of Chairman, Deputy Chairman, all Directors (indicating specifically those who hold executive appointments), and Company Secretary. Information should also be provided for individuals holding more than one fifth of the paid up shares, preference shares or loan capital.

1. SURNAME a) Now		
(b) At birth if different from (a)		
(c) All other surnames used		
2. FULL FORENAMES		
3. PLACE OF BIRTH Including county, state and country		
4. DATE OF BIRTH		
5. NATIONALITY (a) Now		
(b) At any time if different from (a)		
(c) If naturalised state number & date of certificate		
6. ADDRESS (a) Full permanent address		
7. POSITION IN COMPANY		

## **RESTRICTED** (WHEN COMPLETED)

### PART 3

L	Does the information relate to:	1	UK gov	ernment contract?		Complete M to Q	
		2	Private	venture work?		Complete M to P	
		3	NATO	contract?		Complete M to R	
		4	Collabo	ration discussions		Complete M to P	
M	Maximum level of release of protectively marked material:						
N	Name and/or reference of project:						
О	Description of work to be carried out:						
P	Full name and address of project authority:		Q	Contracting authorit	y:		
P	Telephone no:		Q	Contracting authorit	y:		
P			Q		y:		
	Telephone no:		Q		y:		
R	Telephone no:				y:		