

FIPS 201 Evaluation Program Central Certificate Validator Certificate Submission Form

The following form needs to be completed by an organization that plans to utilize the GSA Central Certificate Validator (CCV) for validating certificates. This form is used to submit certificate chains that the organization anticipates using during their authentication process.

Date	
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General Organization Information

Organization Name			
Address 1			
Address 2			
City		State/Province	
Zip/Postal		Country	
Phone			

Contact Information of Submitter

Name			
Phone		Email	

GSA Assigned User ID

#	
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Certificates being provided to GSA[†]

[†] Include the Subject DN and serial number for each certificate being provided

Signature

I hereby claim that I am authorized to sign this form on behalf of the above specified organization. I acknowledge that I have to the best of my knowledge completed the form above.

Signature		Date	
Name			
Designation			