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**“Secure Exchange Website” Request Form**

**Check One:**

Customer     Vendor

Company Name:

Address:

City:

State:

Postal Code:

Country:

Phone:

**Individuals Requiring Access (3 Maximum)**

Name:                      U.S. Person:  Yes  No      Email:

Name:                      U.S. Person:  Yes  No      Email:

Name:                      U.S. Person:  Yes  No      Email:

**Please State Reason Access Is Required**

Requested By:

Date:

**To Be Completed By Trade Compliance**

The requested company has been vetted and cleared:     Yes  No

The requested company individual users has been vetted and cleared:     Yes  No

Trade Compliance Signature: \_\_\_\_\_

IT Department Signature: \_\_\_\_\_

***NOTICE: INFORMATION AND DATA ON THE SECURE EXCHANGE WEBSITE IS SUBJECT TO THE U.S. EXPORT ADMINISTRATION REGULATIONS.***