



**UNCLASSIFIED CONTROLLED INFORMATION (UCI)
CERTIFICATION FORM
(July 2014)**

Solicitation/RFP/RFQ/Subcontract ID Number:

Information Category to Convey to Subcontractor:

Enclosed is a copy of the following:

Y19-206, Manual for Unclassified Controlled Information (LESS APPENDIX B)

I certify that I am a United States Citizen and have read, understood and will abide by the Sections of Y19-206 that are enclosed regarding information protection in conjunction with the subject procurement. Also, note that only United States Citizens may access UCI information unless special Y-12 security permission is obtained.

Additionally, vendors and subcontractors shall use only United States Citizens to perform work on the Y-12 National Security Complex, or to have access to UCI information associated with this procurement (Solicitation package, RFP/RFQ, etc.) unless special Y-12 security permission is obtained. In order to determine that your company is in compliance with this requirement, Consolidated Nuclear Security, LLC (CNS) requires that your company maintain documentation evidence for each of your current employees and subcontractors' employees that work on the Y-12 site or that will have access to UCI information associated with this procurement. Copies of these documents attesting that they are true, accurate, and complete copies are acceptable. You must be able to provide verification evidence upon request.

A list of acceptable evidence is listed here:

- Birth Certificate (Certified Copy)
- Certificates of Naturalization (INS Form N-550 or N-570)
- Certificate of United States Citizenship issued by immigration and naturalization (INS Form N-560 or N-561)
- Report of birth abroad of a citizen of the United States (Form FS-240)
- United States Passport

Seller must return all UCI information upon completion of the procurement action, or when notified by the subcontract administrator that an award has been made.

SIGNATURE:

DATE:

NAME:

AUTHORIZED REPRESENTATIVE OF COMPANY:

TITLE:

Mailing address for express delivery of UCI documents to person certifying above.

STREET ADDRESS:

CITY & STATE:

ZIP CODE: