CERTIFICATION OF QUALIFIED PRODUCTS

Please complete this form to confirm that your product is still available and acceptable for Department of Defense usage. After completion, ensure the form is signed, and email the signed form to:

NAVSEA 05S commandstandards@navy.mil			
1. COMPANY DATA			
a. COMPANY NAME			
b. POINT OF CONTACT (POC) NAME	c. PHONE NUMBER AND EXTENSION		d. EMAIL ADDRESS
e. ALTERNATE POC NAME	f. ALTERNATE POC PHONE NUMBER		g. ALTERNATE POC EMAIL ADDRESS
f. ADDRESSES (Street, City, State, and ZIP Code)			
(1) MAILING ADDRESS AND CAGE:		(2) PHYSICAL ADDRESS OF AND CAGE CODE OF PLANT(S) WHERE PRODUCT(S) IS MANUFACTURED: (If more space is needed, include in remarks.)	
CAGE:		CAGE:	
CONTRACTOR AND GOVERNMENT ENTITY CODE (CAGE) (To register and maintain CAGE Code, go to www.sam.gov . If you experience problems, call the Federal Service Desk toll free at 866-606-8220. Once assigned, forward that code to commandstandards@navy.mil . CAGE Code will appear on the electronic QPL.)			
2. GOVERNING SPECIFICATION NUMBER (include revision letter and/or amendment number) (Example: MIL-PRF-12345A)		3. MANUFACTURER'S DESIGNATION - REMAINS THE SAME? (Please note, it is not necessary to list all approved products.) YES NO (Please list any changes in the "Remarks" section below.)	
4. REMARKS (Please indicate any changes to the company name, address, CAGE codes, as well as any change in products, such as in formulation, design, etc.)			
 5. THE UNDERSIGNED HEREBY CERTIFIES TO THE FOLLOWING STATEMENTS EXCEPT AS MODIFIED UNDER REMARKS. a. Listed product(s) is (are) still manufactured at the plant address(es) shown in 1.f(2) above. b. Plant(s) is (are) under same management. c. Product(s) is (are) being manufactured under the same conditions as originally qualified, i.e., same process, materials, construction, design, and manufacturer's designation. d. Product(s) will meet the requirements and tests of latest effective issue of specification. e. Company name and address(es) for CAGE Codes in Block 1.f(1) and 1.f(2) are current in the www.sam.gov database. 			
6. CERTIFIER			
a. TYPED OR PRINTED NAME		b. POSITION TITLE	
c. SIGNATURE			d. DATE SIGNED (MMDDYYYY)