|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Request for Visit (RFV) / Besuchsantrag  **Stand** / As of : **1. April** / 1st of April **2015**  **Anlage** / Annex **2 - 1**  **Seite** / Page 1  **gem. Handbuch /** iaw. Guide | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | One-time /  Einmaliger Besuch | | | | | | | | | | | | | | | | | | | | Annex(es) /  Anlage(n) | | | | |
|  | | Recurring /  Wiederkehrender Besuch | | | | | | | | | | | | | | | | | | | |  | | | Yes /  Ja | |
|  | | Emergency /  Eiliger Besuch | | | | | | | | | | | | | | | | | | | |  | | | No /  Nein | |
| 1 | Administrative Data /  Personendaten | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Requestor /  Antragsteller | | | | | VERTATT DK | | | | | | Date /  Datum | | | | | | | |  | | | | | | |
|  | to /  an | | | | | BMVg SEI4 | | | | | | Visit ID /  Besuchsnummer | | | | | | | | 2015-22557- | | | | | | |
| 2 | Requesting Government Agency or Industrial Facility /  Antragstellende Dienststelle/Firma | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Name /  Name | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  | Address Postal /  Postanschrift | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  | Telex /  Fax Nr. | | | | |  | | | | | | Telephone Nr. /  Telefon Nr. | | | | | | | |  | | | | | | |
| 3 | Government Agency or Industrial Facility to be visited /  Zu besuchende Dienststelle/Firma | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Name /  Name | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  | Postal Address /  Postanschrift | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  | Telex /  Fax Nr. | | | | |  | | | | | | Telephone Nr. /  Telefon Nr. | | | | | | | |  | | | | | | |
|  | Point of contact /  Ansprechpartner | | | | |  | | | | | | | | | | | | | | | | | | | | |
| 4 | Dates of Visit /  Besuchszeitraum | | | | |  | | to /  von-bis | | |  | |  | |  | | | | | to /  von-bis | | |  | | | |
| 5 | Type of Visit (Select one from each column) /  Grund des Besuches (Kreuzen Sie bitte in jeder Spalte jeweils einen Punkt an) | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | Government initiative /  Regierungsinitiative/-auftrag | | | | |  | | Initiated by requesting agency or facility /  von der antragstellenden Dienststelle/Firma gewünscht | | | | | | | | | | | | | | | | |
|  |  | | Commercial initiative /  Firmeninitiative/-intern | | | | |  | | by invitation of the facility to be visited /  auf Einladung der zu besuchenden Stelle | | | | | | | | | | | | | | | | |
| 6 | Subject to be discussed/Justification /  Besuchszweck (Angaben in Deutsch. Zusätzlich in der Landessprache oder in Englisch) | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 | Anticipated Level of classified Information to be involved /  Zu erwartender Geheimhaltungsgrad | | | | | | | | | | | | |  | | | | | | | | | | | | |
| **Stand** / As of : **1. April** / 1st of April **2015**  **Anlage** / Annex **2 - 1**  **Seite** / Page 2  **gem. Handbuch /** iaw. Guide |  | | | | | | | | | | |  | | | | | | | | | | | | | | |
| 8 | Is the Visit pertinent to /  Steht der Besuch in Zusammenhang mit | | | | | | | | | | | Specify? /  Mit welchem? | | | | | | | | | | | | | | |
|  |  | | a specific equipment or weapon system? /  einem speziellen Waffensystem/Gerät? | | | | | | | | |  | | | | | | | | | | | | | | |
|  |  | | foreign military sales or export license? /  einem Ausfuhrprojekt oder Export-Lizenz? | | | | | | | | |  | | | | | | | | | | | | | | |
|  |  | | a programme or agreement? /  einem Programm oder Vereinbarung? | | | | | | | | |  | | | | | | | | | | | | | | |
|  |  | | a defence acquisition programme? /  einem Beschaffungsprogramm? | | | | | | | | |  | | | | | | | | | | | | | | |
|  |  | | other? /  sonstigem? | | | | | | | | |  | | | | | | | | | | | | | | |
| 9 | Particulars of Visitors /  Daten der Besucher | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Name, First name, Rank/Title /  Name, Vorname, Dgrad/ABez | | | | | |  | | | | | | | | | | | | | | | | | | | |
|  | Date of birth /  Geburtsdatum | | | | |  | | Place of birth /  Geburtsort | | | |  | | | | | | | | | | | | | | |
|  | security clearance /  Sicherheitsermächtigung | | | | |  | | ID/PP Number /  Pass-/Ausweisnummer | | | | | | | |  | | | | Nationality /  Staatsangehörigkeit | | | | | |  |
|  | Position /  Funktion/Dienststellung | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  | Company/Agency /  Dienststelle/Firma | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  | Name, First name, Rank/Title /  Name, Vorname, Dgrad/ABez | | | | | |  | | | | | | | | | | | | | | | | | | | |
|  | Date of birth /  Geburtsdatum | | | | |  | | Place of birth /  Geburtsort | | | |  | | | | | | | | | | | | | | |
|  | security clearance /  Sicherheitsermächtigung | | | | |  | | ID/PP Number /  Pass-/Ausweisnummer | | | | | | | |  | | | | Nationality /  Staatsangehörigkeit | | | | | |  |
|  | Position /  Funktion/Dienststellung | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  | Company/Agency /  Dienststelle/Firma | | | | |  | | | | | | | | | | | | | | | | | | | | |
| 10 | The Security Officer of the requesting Government Agency or Industrial Facility /  Sicherheitsbeauftragter/Sicherheitsbevollmächtigter | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Name /  Name | | |  | | | | | | | | Telephone Nr. /  Telefon Nr. | | | | | | | |  | | | | | | |
|  | Signature /  Unterschrift | | |  | | | | | | | | Date /  Datum | | | | | |  | | | Stamp /  Stempel | | |  | | |
| 11 | Certification of Security Clearance /  Bestätigung der Ermächtigung | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Name /  Name | | |  | | | | | | | | Telephone Nr. /  Telefon Nr. | | | | | | | |  | | | | | | |
|  | Address /  Anschrift | | |  | | | | | | | | | | | | | | | | | | | | | | |
|  | Signature /  Unterschrift | | |  | | | | | | | | Stamp /  Stempel | | | | | | | |  | | | | | | |
| **Stand** / As of : **1. April** / 1st of April **2015**  **Anlage** / Annex **2 - 1**  **Seite** / Page 3  **gem. Handbuch /** iaw. Guide |  | | | | | | | | | | |  | | | | | | | | | | | | | | |
| 12 | Requesting National Security Authority /  Antragstellende nationale Sicherheitsbehörde | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Name /  Name | | |  | | | | | | | | Telephone Nr. /  Telefon Nr. | | | | | | | |  | | | | | | |
|  | Address /  Anschrift | | |  | | | | | | | | | | | | | | | | | | | | | | |
|  | Signature /  Unterschrift | | |  | | | | | | | | Stamp /  Stempel | | | | | | | |  | | | | | | |
| 13 |  | Antrag auf Genehmigung zum Tragen der Uniform | | | | | |  | ja | | | | | | | |  | | nein | | | | | | | |
|  | Ankunft in Deutschland | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Datum | | | | Ortszeit | | | Grenzübertritt (Ort) | | | | | | | | Transportmittel (KfzTyp, pol. Kennzeichen oder Fluglinie/FlugNr) | | | | | | | | | | |
|  |  | | | |  | | |  | | | | | | | |  | | | | | | | | | | |
|  | Abreise aus Deutschland | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Datum | | | | Ortszeit | | | Grenzübertritt (Ort) | | | | | | | | Transportmittel (KfzTyp, pol. Kennzeichen oder Fluglinie/FlugNr) | | | | | | | | | | |
|  |  | | | |  | | |  | | | | | | | |  | | | | | | | | | | |
|  | Remarks / Bemerkungen (Organisatorische Hinweise zur Durchführung der Reise; Begründung warum Vorlagefrist nicht eingehalten werden konnte): | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |