|  |  |
| --- | --- |
| **Ref. No.** |  |
| ***About this Application*** |
| Is this a **NEW** authorisation request?  …. *OR* an authorisation **RENEWAL**?  |
|  |
| Date approval requested by: |  | **IF A RENEWAL**, what is the previous **Ref. No**. for this application? |  |  |
|  |
| Date renewal of access is due: |  |  |
|  |

***About this person*** 🡺 ***refer to the Explanatory Notes on the reverse of this form***

|  |
| --- |
|  |
| Person’s title: |  | Person’s full name: |  |  |
|  |
| Position Title(within the company): |  |  |
|  |
| Phone Number: |  | Fax Number: |  |  |
|  |
| Email address: |  |  |
|  |
| Contact address: |  |  |
|  |

***Security clearance details*** 🡺 ***refer to the Explanatory Notes on the reverse of this form***

|  |
| --- |
|  |
| Reason authorisation is requested for the above person to access associated items: |  |  |
|  |
| Current security clearance level: |  | Date issued: |  | Expiry date: |  |  |
|  |
| Name of Vetting Agency: |  |  |
|  |

|  |  |
| --- | --- |
| ***Applicant’s Signature*** | ***ASNO use only*** |
|  | *Approved: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**for Director General ASNO* |
| Name : |  |  |
|  |
| Position: |  |  |
| Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_\_\_\_ |
|  |
| Name of Permit Holder: |  | Permit number: |  |  |
|  |

Explanatory Notes

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| --- | --- |
| **Ref. No.**  | A sequential reference number is required for each form of this type submitted by the Permit Holder (eg, 001, 002, 003, etc). Where amendments are made to a previously submitted form, please use the same reference with a sequential revision number (eg, 003-Rev.1). |
| **Date approval requested by**  | Access to associated items must not be granted prior to approval. Note that approvals are typically returned within 7 working days after submission of application |
| **Date renewal of access is due**  | This date may not be later than one year after the date authorisation is requested for or the date clearance renewal is due, whichever is the sooner. |
| **Person’s full name**  | Must include all names, as they appear on your employment records, or on the previous authorisation approval. |
| **Contact Address**  | The address to which written notices can be sent. |
| **Applicant’s signature**  | This form must only be signed by an individual authorised by the Permit Holder to provide this application, notification or report. |

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| **This form replaces the following forms 🡪** | ASO122 (version 3 - issued 22 July 2010) and ASO123 |