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**U. S. DEPARTMENT OF STATE**  
**APPLICATION FOR AMENDMENT TO A DSP-5 LICENSE**

\*Transaction Number:

**Please note that an Asterisk (\*) next to a field or block in a document designates a mandatory field or block.**

**No classified information can be included in this application. Classified information must be sent separately to PM/DDTC in accordance with the Defense Security Service guidelines.**

Classified information is being sent under separate cover

**To open a document, click on a document to highlight it and select the "Open Document" button. The document that you selected will open.**

Required Documents	Included Documents
DSP-6 Copy of DoS License with PM/DDTC Proviso(s)	
<input type="button" value="Open Document"/>	<input type="button" value="Open Document"/>

Optional Documents

22 CFR § 126.13 Eligibility Letter DTCC Acknowledgement Letter Other Amplifying Data Other DSP-6 Authorizations Purchase order submitted with original license
<input type="button" value="Open Document"/>

DSP-6  
 Revised Date

SEAL _____ Signature The License identified in Block 4 below is amended as requested on the date indicated at the right of this form.	<b>Amendment Control No.</b> _____ <b>The Indicated License is Amended Effective on:</b> _____
<b>UNITED STATES OF AMERICA DEPARTMENT OF STATE</b> <b>APPLICATION FOR AMENDMENT TO A DSP-5 LICENSE</b>	
<b>*1. Date Prepared (text box – auto filled)</b>	<b>*2. PM/DDTC Applicant/Registrant Code</b> (text box)
<b>3. Applicant Name, Address, ZIP Code and Telephone Number</b>	<b>*4. Amendment to License No</b> (text box)
(Check box) <input type="checkbox"/> Subsidiary    Add Subsidiary Information button *Name (text box)	I certify that the stated license has an unshipped balance and has not expired. <b>*5. Amendment in accordance with (select one)</b> <input type="checkbox"/> 22 CFR § 123.25 <input type="checkbox"/> 22 CFR § 122.4
*Attention (text box) *Address (text box)	<b>6. Compliance Case Number</b> a. Provide Compliance Case Number (text box, 10 characters)
*City (text box)  *State (pick list)                      *ZIP Code (text box) *Telephone # (text box)                      Ext (text box)	b. Provide date of DTCC Acknowledgement Letter (mm/dd/yyyy) (text box)
<b>7. Name and Telephone Number of applicant contact(s) familiar with the application and proposed amendments if U.S. Government needs additional information</b> Name (text box) Telephone # (text box)                      Ext (text box) Add button	<b>*8. Summary of Amendment(s) to DSP-5</b> Type of Amendment(s) - a multiple pick list
<b>9. Change Original PM/DDTC Applicant/Registrant Code (DSP-5 license, Block 2)</b> a. State specific reason for the change (text box) 500 chars  b. PM/DDTC Applicant/Registrant Code as stated on DSP-5 license (text box) 1 letter from { ' F', 'B', 'M', 'G' } and 5 chars c. New PM/DDTC Applicant/Registrant Code (text box) 1 letter from { ' F', 'B', 'M', 'G' } and 5 chars	
<b>10. Change Original Applicant/Subsidiary (DSP-5 license, Block 5)</b> <b>Item # 1:</b>	
a. Type of modification (select one) <input type="checkbox"/> Change in name of original applicant <input type="checkbox"/> Add subsidiary <input type="checkbox"/> Change in name of original subsidiary <input type="checkbox"/> Change in address, city, state and/or ZIP code of original applicant <input type="checkbox"/> Delete subsidiary <input type="checkbox"/> Change in address, city, state and/or ZIP code of original subsidiary <input type="checkbox"/> Change in name, address, city, state and/or ZIP code of original applicant <input type="checkbox"/> Change in name, address, city, state and/or ZIP code of original subsidiary b. State specific reason for the change (text box) 500 chars  c. Applicant/Subsidiary as stated on original DSP-5 license Name (text box) Address (text box) City (text box) State (pick list)                      ZIP Code (text box)	
d. Modified Applicant/Subsidiary Name (text box) Address (text box) City (text box) State (pick list)                      ZIP Code (text box)	

Add button

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**11. Correction to Commodity Description (DSP-5 license, Block 10)**

**Item # 1:**

a. Type of correction (select at least one)  Change part number  Correct typo

If changing a part number, *(appears only if change part number is selected)*

I certify that the change in the part number does not enhance, upgrade or change the capability of the commodity authorized for export.

b. State specific reason for the change *(text box) 500 chars*

c. Change From – Commodity description to include the part number as stated on original DSP-5 license

Line item # *(text box)*

Description *(text box) 500 char*

d. Corrected Commodity description to include the part number

Line item # *(auto filled)*

Description *(text box) 500 char*

Add button

**12. Correction to Quantity (DSP-5 license, Block 9) and/or \$ Value (DSP-5 license, Block 12)**

**Item # 1:**

a. Type of correction (select at least one)  Correct Quantity  Correct \$ Value

b. State specific reason for the change *(text box) 500 chars*

c. Change From – Quantity and/or \$ Value as stated on original DSP-5 license

d. Change to – Quantity and/or \$ Value as it should appear

Line Item #	Quantity	\$ Value		Line Item #	Quantity	\$ Value	
<i>(text box)</i>	<i>(text box)</i>	Unit Price	Line Item Total	<i>(auto Filled)</i>	<i>(text box)</i>	Unit Price	Line Item Total
	Unit Type	<i>(text box)</i>	<i>(text box)</i>		Unit Type	<i>(text box)</i>	<i>(text box)</i>
	<i>(Pick List)</i>				<i>(Pick List)</i>		

Add button

**13. Revised DSP-5 License Total (DSP-5 license, Block 13):**

a. Enter total \$ value as stated on original DSP-5 license in Block 13

*(text box)*

b. Revised total \$ value

*(Calculated from Block 13a and changes in Block 12, or input)*

**14. Correction to Foreign End-User (DSP-5 license, Block 14)**

Item # 1:

a.  Correct typo

b. Foreign End-User as stated on original DSP-5 license

Name (text box, 126 characters max )

Address (text box, 84 characters max )

City (text box, 42 characters max )

c. New Foreign End-User

Name (text box, 126 characters max )

Address (text box, 84 characters max )

City (text box, 42 characters max )

**Add Button****15. Change in Manufacturer of Commodity (DSP-5 License, Block 15)**

Item # 1:

a. Type of Modification (select one)

 Add new manufacturer Delete manufacturer Change in name of original manufacturer Change in address, city, state, and/or ZIP code of original manufacturer Change in name, address, city, state, and/or ZIP code of original manufacturer

If adding new manufacturer of commodity, (appears only if adding new manufacturer)

I certify that the addition of the new manufacturer does not enhance, upgrade or change the capability of commodity (ies) authorized for export.

b. State specific reason for the change

c. Manufacturer of Commodity as stated on original DSP-5 license

d. New/Modified Manufacturer of Commodity

Name		Name	
Address		Address	
City		City	
State (pick list)	ZIP Code	State (pick list)	ZIP Code
Country (pick list)		Country (pick list)	

Add More Items

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**16. Change in Source of Commodity (DSP-5 license, Block 17)**

Item # 1:

a. Type of modification (select one)

 Add new source Delete source Change in name, address, city, state and/or ZIP code of original source Change in name of original source Change in address, city, state and/or ZIP code of original source

If adding new source of commodity (appears only if adding new source),

I certify that the addition of the new source does not enhance, upgrade or change the capability of commodity (ies) authorized for export.

b. State specific reason for the change

c. Source of Commodity as stated on original DSP-5 license

Name (text box)

Address (text box)

City (text box)

State (pick list)

ZIP Code (text box)

Country (pick list)

d. New/Modified Source of Commodity

Name (text box)

Address (text box)

City (text box)

State (pick list)

ZIP Code (text box)

Country (pick list)

**Add button****17. Change Name, Address and/or City of Original Foreign Consignee (DSP-5 license, Block 16)**

Item # 1:

a. Type of modification (select at least one) <input type="checkbox"/> Change in name of original foreign consignee <b>I certify that the change is not the result of a merger or acquisition.</b>	
<input type="checkbox"/> Change in address and/or city of original foreign consignee	
b. State specific reason for the change (select at least one) <input type="checkbox"/> Name Change <input type="checkbox"/> Location Change	
c. For any change where the license is in furtherance of an agreement, the applicant has completed the amendment to the agreement required by 22 CFR 124 to reflect this change. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
d. Foreign Consignee as stated on original DSP-5 license Name (text box)	e. Modified Foreign Consignee Name (text box)
Address (text box)	Address (text box)
City (text box)	City (text box)
Country (pick list)	Country (pick list from left)
<b>Add button</b>	

<b>18. Change Name, Address, City, State and/or ZIP Code of Original U.S. Seller (DSP-5 license, Block 19)</b>			
<b>Item # 1:</b>			
a. Type of modification (select at least one) <input type="checkbox"/> Change in name of original U.S. seller <input type="checkbox"/> Change in address, city, state and/or ZIP code of original U.S. seller			
b. State specific reason for the change (text box) 500 chars			
c. U.S. Seller as stated on original DSP-5 license Name (text box)		d. Modified U.S. Seller Name (text box)	
Address (text box)		Address (text box)	
City (text box)		City (text box)	
State (pick list)		State (pick list)	
ZIP Code (text box)		ZIP Code (text box)	
<b>Add button</b>			
<b>19. Change in Foreign Intermediate Consignee (DSP-5, license Block 18)</b>			
<b>Item # 1:</b>			
a. Type of modification (select one)			
<input type="checkbox"/> Add new foreign freight forwarder		<input type="checkbox"/> Change in name of original foreign intermediate consignee to include foreign freight forwarder	
		<input type="checkbox"/> Change in address and/or city of original foreign intermediate consignee to include foreign freight forwarder	
		<input type="checkbox"/> Change in name, address, city, and/or country of original foreign intermediate consignee to include foreign freight forwarder	
b. State specific reason for the change (text box) 500 chars			
c. Foreign Intermediate Consignee as stated on original DSP-5 Name (text box)		d. New Foreign Intermediate Consignee Name (text box)	
Address (text box)		Address (text box)	
City (text box)		City (text box)	
Country (pick list)		Country (if Add, pick; otherwise auto filled from left row/column)	
<b>Add button</b>			

**20. Change in U.S. Consignor and/or U.S. Freight Forwarder (DSP-5 license, Block 21)**

**Item # 1:**

a. Type of modification (select one)

- |                                                                   |                                                                                                                            |
|-------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Add new U.S. consignor/freight forwarder | <input type="checkbox"/> Change in name of original U.S. consignor/freight forwarder                                       |
|                                                                   | <input type="checkbox"/> Change in address, city, state and/or ZIP code of original U.S. consignor/freight forwarder       |
|                                                                   | <input type="checkbox"/> Change in name, address, city, state and/or ZIP code of original U.S. consignor/freight forwarder |

b. State specific reason for the change (text box) 500 chars

c. U.S. Consignor and/or U.S. Freight Forwarder as stated on original DSP-5 license  
Name (text box)

Address (text box)

City (text box)

State (pick list)

ZIP Code (text box)

d. New/Modified U.S. Consignor or U.S. Freight Forwarder  
Name (text box)

Address (text box)

City (text box)

State (pick list)

ZIP Code (text box)

**Add button**

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**21. Additional Details of Transaction**

(text box) – 1000 chars

**\*22. Applicant's Statement**

I, \_\_\_\_\_, an empowered official (22 CFR § 120.25) or an official of a foreign government entity in the U.S., hereby apply for approval of the above amendment(s); warrant the truth of all statements made herein; and acknowledge, understand and will comply with the provisions of 22 CFR 120-130, and any conditions and limitations imposed.

I am authorized by the applicant to certify the following in compliance with 22 CFR § 126.13:

- (1) Neither the applicant, its chief executive officer, president, vice presidents, other senior officers or officials (e.g., comptroller, treasurer, general counsel) nor any member of its board of directors is:
  - (a) the subject of an indictment for or has been convicted of violating any of the U.S. criminal statutes enumerated in 22 CFR § 120.27 since the effective date of the Arms Export Control Act, Public Law 94-329, 90 Stat. 729 (June 30, 1976); or
  - (b) ineligible to contract with, or to receive a license or other approval to import defense articles or defense services from, or to receive an export license or other approval from any agency of the U.S. Government;
- (2) To the best of the applicant's knowledge, no party to the export as defined in 22 CFR § 126.7 (e) has been convicted of violating any of the U.S. criminal statutes enumerated in 22 CFR § 120.27 since the effective date of the Arms Export Control Act, Public Law 94-329, 90 Stat. 729 (June 30, 1976), or is ineligible to contract with, or to receive a license or other approval to import defense articles or defense services from, or to receive an export license or other approval from any agency of the U.S. Government.

\*22 CFR § 126.13 Certification (select one)

- I am authorized by the applicant to certify that the applicant and all the parties to the transaction can meet in full the conditions of 22 CFR § 126.13 as listed in Block 21.
- I am authorized by the applicant to certify to 22 CFR § 126.13. The applicant or one of the parties of the transaction cannot meet one or more of the conditions of 22 CFR § 126.13 as listed in Block 21. A request for an exception to policy is attached.
- I am not authorized by the applicant to certify the conditions of 22 CFR § 126.13 as listed in Block 21. The applicant and all the parties to the transaction can meet in full the conditions of 22 CFR § 126.13 as listed in Block 21. Please see attached letter for such certification.

I am not authorized by the applicant to certify the conditions of 22 CFR § 126.13 as listed in Block 21. The applicant or one of the parties of the transaction cannot meet one or more of the conditions of 22 CFR § 126.13 as listed in Block 21. A letter of such certification and request for an exception to policy is attached.

Signature

Signature button

**23. Response to be sent to: (Enter name address and phone number:)**

*[Block is inactive on electronic form]*

Name (text box)

Attention (text box)

Address (text box)

City (text box)

State (pick list)

ZIP Code (text box)

Telephone # (text box)

Ext. (text box)

## **CONDITIONS OF ISSUANCE**

1. When approved, all of the original conditions except as modified by the Directorate of Defense Trade Controls (PM/DDTC) remain applicable.
2. This amendment, when approved, becomes a part of the license identified in Block 4 on Page 1 of this form. When returned to the applicant, it must be attached to the original license prior to further use of the license or must be provided to U.S. Customs and Border Protection for filing with the original license.



**Subsidiary Information under Block 3, Page 1 of the DSP-6**

Name  
Attention  
Address  
City


State  
Telephone #


ZIP Code  
Ext
