



INSTRUCTIONS: Print clearly in all fields except for signatures. This form must be completed in its entirety by approved verification firms for the Known Shipper Program and email as a PDF to CCSP@dhs.gov or via fax to (703) 603-0725..

Section 1. Facility and Contact Data			
Date of physical visit: / /		Name of business visited:	
Also doing business as (trade name):		Business type:	
Number of years in business:		Employer's Identifying Number:	
Name of individual contacted:		Title:	
Section 2. Address Information			
Physical address:		City:	State:
Mailing address <i>(if different)</i> :		City:	State:
			Zip:
			Zip:
Section 3. Shipper's Contact Information			
Physical location phone number:		Principal contact phone number:	
Emergency phone number:		Fax number:	
Email address: @		Web address:	
Section 4. Verifier's Information			
Name & title of employee or authorized representative verifying the above information:			
Name of aircraft operator:		Phone number:	Email address:
<p>I certify the above information is true and correct and the onsite visit and verification was conducted in person as required by the TSA standard security program and applicable security directives. This certification is (i) made with the understanding that any intentional falsification may be subject to both civil and criminal penalties under 49 CFR 1540.103 and 18 U.S.C. 1001 and (ii) subject to record keeping requirements approved by TSA.</p>			
Signature of Verifier:			
Signature of Shipper:			

PAPERWORK REDUCTION ACT BURDEN STATEMENT: TSA is collecting this information to qualify entities as Known Shippers. The public burden for this collection of information is estimated to be approximately 60 minutes. This is a mandatory collection of information. Send comments regarding this burden estimate or any other aspect of this collection to: TSA-11, Attention: PRA 1652-XXXX 601 South 12th Street, Arlington, VA 22202. An agency may not conduct or sponsor, and persons are not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number assigned to this collection is 1652-XXXX, which expires dd/mm/yyyy.