NAVAL POTENTIAL CONTRACTOR PROGRAM

Application Guidebook

POC: Karen Armentani
Office of Naval Research, Philadelphia, PA
Attn: NARDIC
Tel: (215) 697-9531  Fax: (215) 697-9534
E-mail: nardic@onr.navy.mil
http://www.onr.navy.mil
(ONR Keyword: NARDIC)
<table>
<thead>
<tr>
<th>SECTION</th>
<th>TITLE</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preface</td>
<td></td>
<td>i</td>
</tr>
<tr>
<td>1</td>
<td>Eligibility</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>How to Acquire an NPCP Agreement</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>After the Agreement is Established</td>
<td>4</td>
</tr>
<tr>
<td>3</td>
<td>DD FORM 1498: Technical Effort and Management System</td>
<td>5</td>
</tr>
<tr>
<td>4</td>
<td>NPCP Policy Agreement for Participation in the Naval Potential Contractor Program</td>
<td>11</td>
</tr>
<tr>
<td>5</td>
<td>DD FORM 2345: Militarily Critical Technical Data Agreement</td>
<td>13</td>
</tr>
<tr>
<td>6</td>
<td>DD FORM 1540: Registration for Scientific and Technical Information Services</td>
<td>17</td>
</tr>
<tr>
<td>7</td>
<td>NPCCP Agreement Application Forms</td>
<td>20</td>
</tr>
</tbody>
</table>
The Naval Potential Contractor Program (NPCP) provides an approved means for the interchange of controlled information between Department of Defense (DoD) activities and researchers from qualified firms, universities, and other non-government organizations. Applying for the agreement leads to a security clearance needed for relevant visits to Naval facilities. Also, the agreement serves as a need-to-know certification required for attendance at relevant classified conferences. Agreements are established for a maximum of three years.

Through the NPCP, access is allowed to documents at the Navy Acquisition, Research and Development Information Center (NARDIC), within the Office of Naval Research in Arlington, Virginia, which is the central point where Naval research and development planning and requirements information is available. Information is also available from other Naval and defense activities, including the Defense Technical Information Center (DTIC).

This program is designed for both potential contractors and current DoD contractors seeking information in areas not covered by contracts. The information enables these contractors to:

1. discover and assess Naval applications for their current and planned products and services, and
2. plan future Independent Research and Development (IR&D) efforts to synchronize with stated Naval requirements.

Specifically, the NPCP provides access to classified and unclassified scientific and technical information concerning Naval needs, requirements, programs, accomplishments, advance planning, and funding associated with research, development, and test and evaluation. Access is based on the need-to-know required to conduct a project or study at no cost to the Government. The potential contractor is required to invest company discretionary resources to support the collection, review and application of the received information to an identified study/project/course of action associated with the maintenance or establishment of capability as a developer and producer of military technology.

In turn, the process provides Naval industrial base for effectively responding to Naval needs and the opportunity to integrate contractors' technical information with their own research to establish technical specifications and enhanced capability for future systems.

Thank you for your interest in the NPCP. To ensure prompt processing, please be sure to review and follow the instructions in this guidebook.

Note: The contents of this document do not supersede any regulation set forth by the DoD.
Eligibility

Firms, individuals, and universities (referred to here as the NPCP applicant) with a demonstrated capability of performing research and development with a reasonable potential for eventually receiving a contract with a Naval activity are eligible to participate in the NPCP. This includes U.S. companies under foreign ownership, control, or influence when the foreign involvement has been negated and the company maintains a valid facility clearance in accordance with the provisions of the National Industrial Security Program Operating Manual (DoD 5220.22-M of Jan 95). Qualified non-government activities choosing to participate in the NPCP will enter into a policy agreement with an appropriate Naval activity.

Although participation in this program is available to all potential contractors, it is specifically aimed to assist those who do not have an active DoD contract but have a current or potential capability to perform work of interest to a Naval activity. Participation will be granted after an evaluation of capabilities (experience, personnel, facilities) is made, and a policy agreement is executed.

How to Acquire An NPCP Agreement

All necessary forms and this Application Guidebook are available at the NARDIC web site at http://www.onr.navy.mil (ONR Keyword: NARDIC). Click on Naval Potential Contractor Program (NPCP).

If you are reading a paper copy of this guidebook, forms are in Section 7. Follow instructions in this guidebook for selection and completion of the appropriate forms for your organization’s information access needs.

Please note that the same person must be listed as the Principal Investigator on DD FORM 1498, block 20c; as the Data Custodian on DD FORM 2345, block 3a, and as the Attention Name on DD FORM 1540, block 4a. The forms are shown on the next page.
Naval Potential Contractor Program: Section 1

How to Acquire An NPCP Agreement (Cont.)

Technical Effort and Management System

(DD FORM 1498)

NPCP Policy Agreement for Participation in the Naval

POLICY AGREEMENT

For Participation in the Naval Potential Contractor Program

HPD Agreement No.:

Prior to obtaining information or material in connection with the Naval Potential Contractor Program (NPCP), the

Policies of this agreement will be developed and provided to the applicant.

1. The Naval Potential Contractor Program (NPCP) is a program

2. The following policies shall apply to the program.

3. The following policies shall apply to the program.

4. The following policies shall apply to the program.

5. The following policies shall apply to the program.

Militarily Critical Technical Data Agreement

(DD FORM 2345)

Registration for Scientific and Technical Information Services

(DD FORM 1540)
2. A company, university, individual, or other non-government organization (referred to here as the applicant) interested in an NPCP agreement should first match its capabilities to a specific Naval research and development activity, laboratory, or systems command (referred to here as the sponsoring activity), which establishes the agreement. To facilitate the correct match, Independent Research and Development (IR&D) and NPCP points of contact (POCs) are listed at the web site of the Navy Acquisition, Research and Development Information Center (NARDIC) at http://www.onr.navy.mil (ONR Keyword: NARDIC). Most often, the NPCP POC also performs the role of NPCP Manager who has NPCP final signature and approval authority. These POCs will help match the applicant with a relevant, technical POC (referred to here as the responsible individual (RI)) at the sponsoring activity. Also, an RI may initiate a request of his/her Naval activity to establish an NPCP agreement with the applicant.

3. Complete DD FORM 1498 and the NPCP Policy Agreement as instructed in this guidebook. DD FORM 2345 and DD FORM 1540 are optional; please read sections 5 and 6 to determine if these two other forms are applicable to you. **Completed forms must not contain classified information.**

4. Send all completed forms to the Naval activity sponsoring the agreement.

5. The application will be processed according to the following procedure:
   a. The NPCP Manager will track and maintain control of the registration process.
   
   b. The RI specified on DD FORM 1498 (block 19c) will accept responsibility for the actions covered by this agreement and confirm the need-to-know for classified information and for participation in classified meetings and events.
   
   c. The security office at the sponsoring activity will interface with the Defense Security Service to ensure appropriate clearance requirements are met and identified in a DD FORM 254 generated by the security office and attached to the approved NPCP agreement.
   
   d. The NPCP Manager will approve and sign the agreement.
   
   e. A dated copy of the completed agreement will be returned to the principal investigator of the applicant organization as notification that the agreement has been approved and established. The entire process averages three to six months if there are no problems with the registration process.

6. All questions concerning the registration process are to be directed to the sponsoring activity.
After the Agreement is Established

An NPCP agreement will be in effect for a maximum of three years.

**An NPCP agreement cannot be renewed.** A new NPCP registration package must be submitted upon completion or termination of the old agreement. Access to NARDIC and DTIC that is based on this agreement will also expire at the end of this agreement.

**The NPCP agreement participating organization (NPCP-APO) must provide an annual progress report.** This information is to be entered on DD FORM 1498. The form is available at http://www.onr.navy.mil (ONR Keyword: NARDIC). Click on Naval Potential Contractor Program. The agreement may be canceled if reports are not submitted.

Written notification of any changes to the NPCP-APO name, address, principal investigator, responsible individual (RI), security status, project, etc., must be sent to the NPCP Manager.

All documents are to be requested via proper channels from the RI, NARDIC, DTIC, or the library of the sponsoring activity.
DD FORM 1498 is used to define objective(s) and approach, and to report progress.

The form, described in detail on the following five pages, consists of 25 sections.

DD FORM 1498 is required at the start of each NPCP effort and annually thereafter, until the project is completed or terminated.

Do not use continuation pages. DD FORM 1498 must stand on its own.

**DD FORM 1498 must not contain classified information.**

All patents and inventions shall be reported.
1. **AGENCY ACCESSION**
   Leave Blank

2. **DATE OF SUMMARY**
   Enter the year, month, and day submitted: (e.g., 2003 11 24 for November 24, 2003).

3. **DATE OF PREVIOUS SUMMARY**
   For a new summary, enter “None”. For an updated summary, use the date (Block 2) from the last DD FORM 1498 submitted. (e.g., 2003 11 24 for November 24, 2003).

4. **KIND OF SUMMARY**
   Enter the appropriate letter as described below.
   - D. Change: For annual NPCP reports and to report substantive revisions to a previously submitted summary or to reinstate an effort previously reported as terminated.
   - H. Term: To report on an incomplete work unit effort that has been canceled, suspended, or discontinued.
   - K. Compl: Final report on a completed work unit effort.
   - R. Corr: Submitted to indicate an editorial change or to correct a minor error on a previously submitted summary. (Use the date of the original summary to be corrected in item 2.)

5. **SUMMARY SECURITY**
   Pre-entered “U” for UNCLASSIFIED. This represents the classification of this DD FORM 1498. **Classified information must not be entered on this form.**

6. **WORK SECURITY**
   Enter the letter code U, C, S (UNCLASSIFIED, CONFIDENTIAL OR SECRET) that describes the highest classification level of data to be requested through this agreement.

7. **REGRADING**
   Leave blank

8. **DISBURSING INSTRUCTIONS**
   Pre-entered “GP” to designate U.S. Government-only property information.
### 9. LEVEL OF SUMMARY
Pre-entered “A. WORK UNIT”

### 10. NO./CODES

#### a. PRIMARY PROGRAM ELEMENT
Pre-entered “NPCP”

**PROJECT NUMBER**
Pre-entered “0”

**TASK AREA NUMBER**
Pre-entered “0”

**WORK UNIT NUMBER**
Leave blank.

#### b. CONTRIBUTING
Leave blank.

#### c. CONTRIBUTING
Leave blank.

### 11. TITLE
The title should describe the objective of the work being performed and its military relevance. **The title must be unclassified.** Enter a “U” in front of the title.

### 12. SUBJECT AREAS
These are the technological topics that expand on the title. Choose from the list titled “Subject Fields and Groups” on the reverse side of DD FORM 1540. Enter both the topic(s) and the identifying number(s) from the list. Separate each subject area entry with a semicolon.

---

**DD FORM 1540**

<table>
<thead>
<tr>
<th>1. AGENCY ACCESSION</th>
<th>2. DATE OF SUMMARY</th>
<th>REPORT CONTROL SYMBOL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>DD-A&amp;T(AR)636</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>GP</td>
<td></td>
<td>A. WORK UNIT</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>10. NO./CODES: PROGRAM ELEMENT</th>
<th>PROJECT NUMBER</th>
<th>TASK AREA NUMBER</th>
<th>WORK UNIT NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. PRIMARY</td>
<td>NPCP</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>b. CONTRIBUTING</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. CONTRIBUTING</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| 11. TITLE | Precede with Security Classification Code |

<table>
<thead>
<tr>
<th>12. SUBJECT AREAS</th>
</tr>
</thead>
</table>

---

7
## Naval Potential Contractor Program

### 13. START DATE
Enter year and month the work will begin (e.g., 2003 11 for November 2003).

### 14. ESTIMATED COMPLETION DATE
Enter the year and month the work will be completed (e.g., 2006 10 for October 2006).

### 15. FUNDING ORGANIZATION
Pre-entered “DN” for Department of the Navy.

### 16. PERFORMANCE METHOD
Leave blank.

### 17. CONTRACT/GRANT
Leave blank.

#### a. DATE EFFECTIVE
For a NEW agreement, leave blank. For a CHANGE, CORRECTION, or COMPLETION summary, enter the dates of the NPCP Agreement.

#### b. CONTRACT/GRANT NUMBER
For a NEW agreement, leave blank. For a CHANGE, TERMINATION, CORRECTION, or COMPLETION summary, fill in the NPCP agreement number.

#### c. TYPE
Pre-entered “J.FFP”

#### d. AMOUNT
Pre-entered “$0”

#### e. KIND OF AWARD
Enter either “New” or “Con” to indicate whether this is a new or continuing project.

#### f. CUM/TOTAL (Cumulative Total)
For a NEW summary, leave blank. For a CHANGE, TERMINATION, CORRECTION, or COMPLETION summary, enter the total dollar amount for the entire project.

### 18. RESOURCES ESTIMATE

<table>
<thead>
<tr>
<th>FISCAL YEARS</th>
<th>a. PROFESSIONAL WORK YEARS</th>
<th>b. FUNDS (in thousands)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>$0</td>
</tr>
</tbody>
</table>

- **FISCAL YEARS**
Enter the preceding and current fiscal years.

- **a. PROFESSIONAL WORK YEARS**
Enter estimates of professional level of effort (to the nearest tenth of a work year) for each year specified in 18.

- **b. FUNDS**
Pre-entered “$0”
19. RESPONSIBLE DOD ORGANIZATION

a. NAME
If not pre-entered, enter the name of the sponsoring activity.

b. ADDRESS
If not pre-entered, enter the address of the sponsoring activity.

c. NAME OF RESPONSIBLE INDIVIDUAL
If not already entered, enter surname first, then first name, include Naval activity code (in parentheses) on the same line. NOTE: The Responsible Individual (RI) from the DoD activity will confer directly with the Principal Investigator (PI) from the NPCP-APO. The RI will approve/disapprove all requests/work under this NPCP agreement.

d. TELEPHONE NUMBER
Enter the area code and number of the RI identified in 19c.

20. PERFORMING ORGANIZATION (items a through f)
Enter the complete address of the applicant. Enter the surname of the PI and associate investigators first, followed by the first name.

21. GENERAL USE
Enter "M" if the application of the technology development is for military use only.
Enter "C" if the application is both civilian and military.
22. **KEYWORDS**
Enter the NPCP as the first word. Use at least three additional words (less than 50 characters each) that express the major concepts of the technical effort being described. Examples of keywords are countermeasure acoustics, sonar research, and unmanned underwater vehicles. Precede each keyword or set of keywords with classification codes (U) for UNCLASSIFIED, (C) for CONFIDENTIAL, or (S) for SECRET to identify overall classification of the subject matter. If “C” is entered in block 21, use “PAT” or “INV” if a patent or invention has resulted or is expected from this work.

23. **TECHNICAL OBJECTIVE**
Provide a concise statement describing the principal technical objective and identify the work’s relevancy to the defense mission.

24. **APPROACH**
Describe the planned steps or phrases to be conducted to reach the stated objective.

25. **PROGRESS**
Enter the dates covered by this summary (e.g., 2003 11 to 2004 10 for November 2003 through October 2004). Provide progress information in accordance with the type of summary identified in block 4. List and attach copies of relevant reports and presentations, if not already provided to the RI.
A Policy Agreement is required at the start of each NPCP project.

This form officially records your participation in the NPCP program. The agreement establishes the following:

1. the conditions under which the Naval sponsoring activity will provide the NPCP-APO access to Government documents needed for the NPCP project;

2. that the materials furnished are not to be construed as a request for proposal, as a commitment from the Government to issue a contract, or as authority for the NPCP-APO to incur expenses in anticipation of a Government contract, or as a basis of claim against the Government;

3. that the NPCP-APO will perform the efforts/study documented on DD FORM 1498; and

4. that the NPCP-APO will furnish annual progress and completion information on the objective(s) undertaken.

The following steps describe how to fill out the form.
Check one of the three boxes at the top of the form.

NAME OF ORGANIZATION & MAILING ADDRESS
Enter the applicant’s name and address.

SIGNATURE OF SENIOR OFFICIAL & DATE
Sign and date the agreement.

TYPED NAME AND TITLE
Enter the name and title of the individual who signed the agreement above.

NPCP SPONSORING ACTIVITY AND ADDRESS
If not pre-entered, leave blank.

SIGNATURE OF NPCP MANAGER & DATE
Leave blank.

TYPED NAME AND TITLE
Leave blank.

CERTIFICATE
NOTE: When a corporation is a party hereto, this certificate must be executed by a corporate officer other than the official who signed the above agreement on behalf of the corporation.

I, ___________________________ certify that I am ___________________________ of the corporation that ___________________________, who signed this agreement on behalf of the Corporation, was then ___________________________ of said corporation; that said agreement was duly signed for and in behalf of said corporation by authority of its governing body, and is within the scope of its corporate powers.

(Corporate Seal)

Signature

CORPORATE SEAL
If the applicant is a corporation, a corporate seal must be stamped at the lower-left corner of the form.
DD FORM 2345 is required for access to export-controlled information (i.e., information containing militarily critical technical data).

Even if approved to view SECRET information, the applicant cannot view export-controlled information without a certification number from the Defense Logistics Information Service (DLIS).

PRIOR TO FILLING OUT THE FORM: determine if your company already has certification to access export-controlled data. Check internally, access http://www.dlis.dla.mil/jcp or call DLIS at (800) 352-3572.

TO APPLY:
1. If the applicant is a company, attach to the form a copy of the incorporation certificate, business license, sales tax payment, or federal identification number.

2. On DD FORM 2345, the Data Custodian name entered in block 3a must be the same as the PI on DD FORM 1498, block 20c, and as the Attention Name on DD FORM 1540, block 4a.

3. Please note, although the form provides the DLIS address, send it with the other NPCP application forms to the NPCP sponsoring activity.

The information on the following three pages complements the instructions furnished on the reverse of DD FORM 2345.

The DLIS will review the DD FORM 2345 within about five working days and either approve the application, return it because of insufficient information, or initiate rejection action if the submittal does not meet the eligibility requirements.
1. **TYPE OF SUBMISSION**
Mark the appropriate box.

2. **ENTERPRISE OR INDIVIDUAL DATA**
   a. **NAME**
   For an enterprise, enter the full name of the corporate entity or institution. If applicable, the full name of the corporate parent must be entered in Block 2a and the name of the subsidiary applying for certified contractor status entered in Block 2c. Please note that each corporate subsidiary, including field sales offices, division, or department that is to receive militarily critical technical data, must be certified separately.

   b. **ADDRESS**
   The street address of the applicant.

   d. **CAGE CODE**
   If your facility has been issued a CAGE Code, enter it here. If no such code has been assigned, enter N/A.

### MILITARILY CRITICAL TECHNICAL DATA AGREEMENT

<table>
<thead>
<tr>
<th>(Please read Agency Disclosure Notice, Privacy Act Statement and Instructions on back before completing this form.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAIL THE ORIGINAL, COMPLETED COPY OF THIS FORM AND A COPY OF YOUR COMPANY'S INCORPORATION CERTIFICATE, STATE/PROVINCIAL BUSINESS LICENSE, SALES TAX IDENTIFICATION FORM OR OTHER DOCUMENTATION WHICH VERIFIES THE LEGITIMACY OF THE COMPANY TO:</td>
</tr>
<tr>
<td>U.S./CANADA JOINT CERTIFICATION OFFICE</td>
</tr>
<tr>
<td>DEFENSE LOGISTICS INFORMATION SERVICE</td>
</tr>
<tr>
<td>FEDERAL CENTER, 74 WASHINGTON AVE., NORTH</td>
</tr>
<tr>
<td>BATTLE CREEK, Ml USA 49017-3684</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1. TYPE OF SUBMISSION (X one)</th>
<th>a. INITIAL SUBMISSION</th>
<th>b. REVISION</th>
<th>c. 5-YEAR RENEWAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. ENTERPRISE OR INDIVIDUAL DATA (Refer to as a &quot;certified contractor&quot; upon acceptance of certification by the U.S./Canada JCO)</td>
<td>a. NAME (Name of Enterprise or Individual)</td>
<td>b. ADDRESS (Physical address, including P.O. Box if applicable)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c. NAME OF SUBSIDIARY/DIVISION/DEPARTMENT</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>d. CAGE CODE</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. **DATA CUSTODIAN**
   a. **NAME OR POSITION DESIGNATION**
   Enter the name and position of the person who will be responsible for receiving and disseminating militarily critical technical data; only one person can be named as Data Custodian. In the case of an enterprise, the person named or filling the position listed must be a salaried employee of the enterprise.

   **IMPORTANT NOTE:** The Data Custodian must be the PI named on DD FORM 1498, block 20c, and the Attention Name entered on DD FORM 1540, block 4a.

   b. **TELEPHONE NUMBER**
   Enter the appropriate information.

   c. **TITLE**
   Enter the name of your job position.

   d. **E-MAIL ADDRESS**
   Enter the appropriate information.
4. DESCRIPTION OF RELEVANT BUSINESS ACTIVITY
The information provided here is a key element of the certification process, because it will be used for two purposes. First, it will be one basis for approving or disapproving applications. Second, it will be used by controlling authorities as a basis for approving or disapproving specific requests for technical data. Consequently, make sure the description of your business activity is sufficiently detailed to justify requests for any data you expect to need. If research, development, testing, or evaluation activities are stated, include a brief description of the specific areas being investigated. If manufacturing activities are stated, include a brief description of the specific products manufactured and their applications. If service activities are stated, include a brief description of the type of service provided. You should not include proprietary or sensitive information, because everything you enter on form DD FORM 2345 will be publicly available.

5. CITIZENSHIP/RESIDENCY STATUS
The person designated in Block 3a must be a citizen or a person admitted lawfully for permanent residence into the United States. If appropriate, enter “X” in the box in front of (1).

6. CONTRACTOR CERTIFICATION
I certify that the information and certifications made by me are true, complete, and accurate to the best of my knowledge and belief and are made in good faith. I understand that a knowing and willful false statement on this form can be punished by fine or imprisonment or both.

For U.S. contractors see U.S. Code, Title 15, Section 1001 and for Canadian contractors see Section 29 of the Defense Production Act.

5. CITIZENSHIP/RESIDENCY STATUS
The person designated in Block 3a must be a citizen or a person admitted lawfully for permanent residence into the United States. If appropriate, enter “X” in the box in front of (1).

6. CONTRACTOR CERTIFICATION
If an enterprise is identified in Block 2, a person who can legally obligate the enterprise to a contract must sign in Block 6.
Naval Potential Contractor Program

DD FORM 2345

<table>
<thead>
<tr>
<th>7a. CERTIFICATION ACTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leave blank.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8. DOD OFFICIAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leave blank.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9. CANADIAN OFFICIAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leave blank.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7. CERTIFICATION ACTION (For JCO Use Only)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. CERTIFICATION ACCEPTED. This certification number, along with a statement of intended data use, must be included with each request for military critical technical data.</td>
</tr>
<tr>
<td>b. NUMBER</td>
</tr>
<tr>
<td>c. EXPIRATION DATE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8. DOD OFFICIAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. TYPED NAME (LAST, First, Middle Initial)</td>
</tr>
<tr>
<td>b. TITLE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9. CANADA OFFICIAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. TYPED NAME (LAST, First, Middle Initial)</td>
</tr>
<tr>
<td>b. TITLE</td>
</tr>
</tbody>
</table>

DD FORM 2345, JUL 2003  PREVIOUS EDITION IS OBSOLETE.

Reset
DD FORM 1540 - Registration for Scientific and Technical Information Services

Complete the DD FORM 1540, which is required for access to information at NARDIC and from the Defense Technical Information Center (DTIC). For more information on the products and services available from DTIC, see http://www.dtic.mil.

Although DD FORM 1540 is a DTIC form, you must return it to the Naval sponsoring activity, which enters the NPCP agreement number and the U.S. Government approval. The back of the form defines access privileges to DoD-held information. The Naval sponsoring activity will forward the DD FORM 1540 to DTIC, which will send a user code to the NPCP-APO.

The following two pages describe how to fill in Sections I and V, which are the only sections to be filled in by an NPCP applicant. Subcontracting under the NPCP program is not allowed.
1. **ORGANIZATION NAME**
Enter the name of the applicant organization.

2. **SUBORGANIZATION NAME**
If applicable, enter the name of the division or department of the applicant organization.

3. **ADDRESS** (Items a through d)
For receipt of classified documents, this address must be the one for which the facility clearance and storage capability are registered.

4. **ATTENTION** (Items a through c)
Enter information for the person who will be receiving the documents. This must be the same name as the PI on DD FORM 1498, block 20c, and as the Data Custodian on DD FORM 2345, block 3a.

<table>
<thead>
<tr>
<th>3. ADDRESS (Items a through d)</th>
<th>4. ATTENTION (Items a through c)</th>
</tr>
</thead>
<tbody>
<tr>
<td>For receipt of classified documents, this address must be the one for which the facility clearance and storage capability are registered.</td>
<td>Enter information for the person who will be receiving the documents. This must be the same name as the PI on DD FORM 1498, block 20c, and as the Data Custodian on DD FORM 2345, block 3a.</td>
</tr>
</tbody>
</table>

### REGISTRATION FOR SCIENTIFIC AND TECHNICAL INFORMATION SERVICES

The public reporting burden for this collection of information is estimated to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (0704-0264), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be advised that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

**PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ADDRESS. SEND YOUR COMPLETED FORM TO: DEFENSE TECHNICAL INFORMATION CENTER, ATTN: DTIC-BCS, 8725 JOHN J. KINGMAN ROAD, SUITE 0944, FORT BELVOIR, VA, 22060-6218.**

### SECTION I - GENERAL INFORMATION

<table>
<thead>
<tr>
<th>1. ORGANIZATION NAME</th>
<th>2. SUBORGANIZATION NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>3a. STREET ADDRESS</td>
<td>b. CITY</td>
</tr>
<tr>
<td>c. STATE</td>
<td>d. ZIP CODE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. ATTENTION</th>
<th>5. TELEPHONE NUMBER (Include area code)</th>
<th>6. FAX NUMBER (Include area code)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. NAME (Last, First, Middle Initial)</td>
<td>b. COMMERCIAL</td>
<td>a. COMMERCIAL</td>
</tr>
<tr>
<td>b. POSITION/TITLE</td>
<td>b. DSN</td>
<td>b. DSN</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7. INTERNET E-MAIL ADDRESS</th>
<th>8. a. PRIME CONTRACT NUMBER (Or other appropriate number) (Contractors only)</th>
<th>b. EXPIRATION (YYYY-MM-DD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>b. COMMERCIAL</td>
<td>a. COMMERCIAL</td>
<td>DATE</td>
</tr>
</tbody>
</table>

5. **TELEPHONE NUMBER** (Items a and b)
Enter the number of the applicant organization.

6. **FAX NUMBER** (Items a and b)
Enter the number of the applicant organization.

7. **INTERNET E-MAIL ADDRESS**
Enter the e-mail address of the person listed in Block 4a.
# Naval Potential Contractor Program

**DD FORM 1540**

## SECTIONS II, III and IV
Leave blank.

## SECTION V - SUBJECT FIELDS AND GROUPS
BACK OF FORM
Enter an “X” in front of the topics that apply to documents needed by the applicant **AND** are applicable to this NPCP agreement.

### 8a. PRIME CONTACT NUMBER
Leave blank.

### 8b. EXPIRATION DATE
Leave blank.

### 9. CURRENT OR FORMER USER
Put an "X" in one of the boxes. If YES, enter the DTIC code.

### 10. MILITARILY CRITICAL TECHNICAL DATA AGREEMENT CERTIFICATION NUMBER
If available, enter the number on DD FORM 2345, section 7, as assigned by the DLIS.

### 11. TYPE OF ACCESS DESIRED
Put an "X" in the boxes designating levels of access requested.

<table>
<thead>
<tr>
<th>7. INTERNET E-MAIL ADDRESS</th>
<th>8a. PRIME CONTRACT NUMBER (Or other appropriate number) (Contractors only)</th>
<th>b. EXPIRATION DATE (YYYYMMDD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>9. CURRENT OR FORMER USER (X one)</td>
<td>10. MILITARILY CRITICAL TECHNICAL DATA AGREEMENT CERTIFICATION NUMBER (Contractors only)</td>
<td></td>
</tr>
<tr>
<td>YES (Enter DTIC user code)</td>
<td>NO</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>11. TYPE OF ACCESS DESIRED (X as applicable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNCLASSIFIED/UNLIMITED</td>
</tr>
</tbody>
</table>

### SECTION II - SECURITY OFFICER
(All U.S. Government organizations must complete Section II if requesting access to classified data.)

- **a. NAME** (Last, First, Middle Initial)
- **b. ORGANIZATION NAME**
- **c. (1) STREET ADDRESS**
- **(2) CITY**
- **c. STATE**
- **d. ZIP CODE**
- **d. TELEPHONE NUMBER** (Include area code)
- **(1) COMMERCIAL**
- **(2) DSN**
- **e. SIGNATURE**
- **f. DATE SIGNED** (YYYYMMDD)
Agreement Application Forms

If you are viewing this guidebook electronically:
Forms are available on the NARDIC NPCP site:
Click on Naval Potential Contractor Program.

If you are reading a paper copy of this guidebook:
Copyable application forms follow.