



**Bidder ID Documentation Submittal Form
U.S. Residents & Foreign Nationals**

SECURE WORKERS ACCESS CONSORTIUM (SWAC) APPROVALS

The Secure Worker Access Consortium (SWAC) is a unique cooperative security program that enables the effective and efficient security threat assessment screening of individuals who require access to designated secure areas or, access to confidential information. SWAC successfully meets the challenges of Personal Identity Verification (PIV) for contracted workers to help ensure they are known, trusted, and have a threat-free history in accordance with federal standards.

SWAC Applicants for CONFIDENTIAL Information Only

SWAC applicants who are eligible for limited access to confidential information only (e.g. project bid documents) shall present themselves and their unexpired government issued documents to a SWAC Processing Center for Positive Identity Verification. **Fill out this one page, one (1) of five (5), then print this form, sign and mail this page to the address provided on page five (5).**

Bidders residing beyond a two-hundred (200) mile radius of Manhattan, New York (e.g., Boston, MA to the north and Washington, D.C. to the South) may bypass physically reporting to a processing center. However, a copy of all required ID documentation (previously selected on the SWAC online application) must be verified by an officer of the Company or the designated Security Information Manager (SIM). In addition, the signature of the applicant, along with a copy of ID Documentation selected on the SWAC online application, must also be notarized and submitted to SWAC via overnight mail. Please provide the information below. **Applicant's name and signature must match all provided ID Documents, then proceed to page two (2), three (3), then (4 & 5 to PRINT).**

Please Type into Gray Fields

Name of SWAC Applicant:

Home Address:

I, the undersigned, hereby certify that the required ID Documentation that I chose on the SWAC online application is my identity, is true and correct, and has been verified by a Company Officer/ Representative whose signature appears below. Attached is a copy of same ID documentation notarized by a Notary Public as stated on documents attached. I willingly give my full consent that information required to verify my identity may be shared with authorized individuals.

Signature of SWAC Applicant: _____ Date:

ID Documentation verified by (Company Officer or Security Information Manager (SIM)):
 Phone Number:

Signature of Company Officer/SIM: _____

Name of Company:

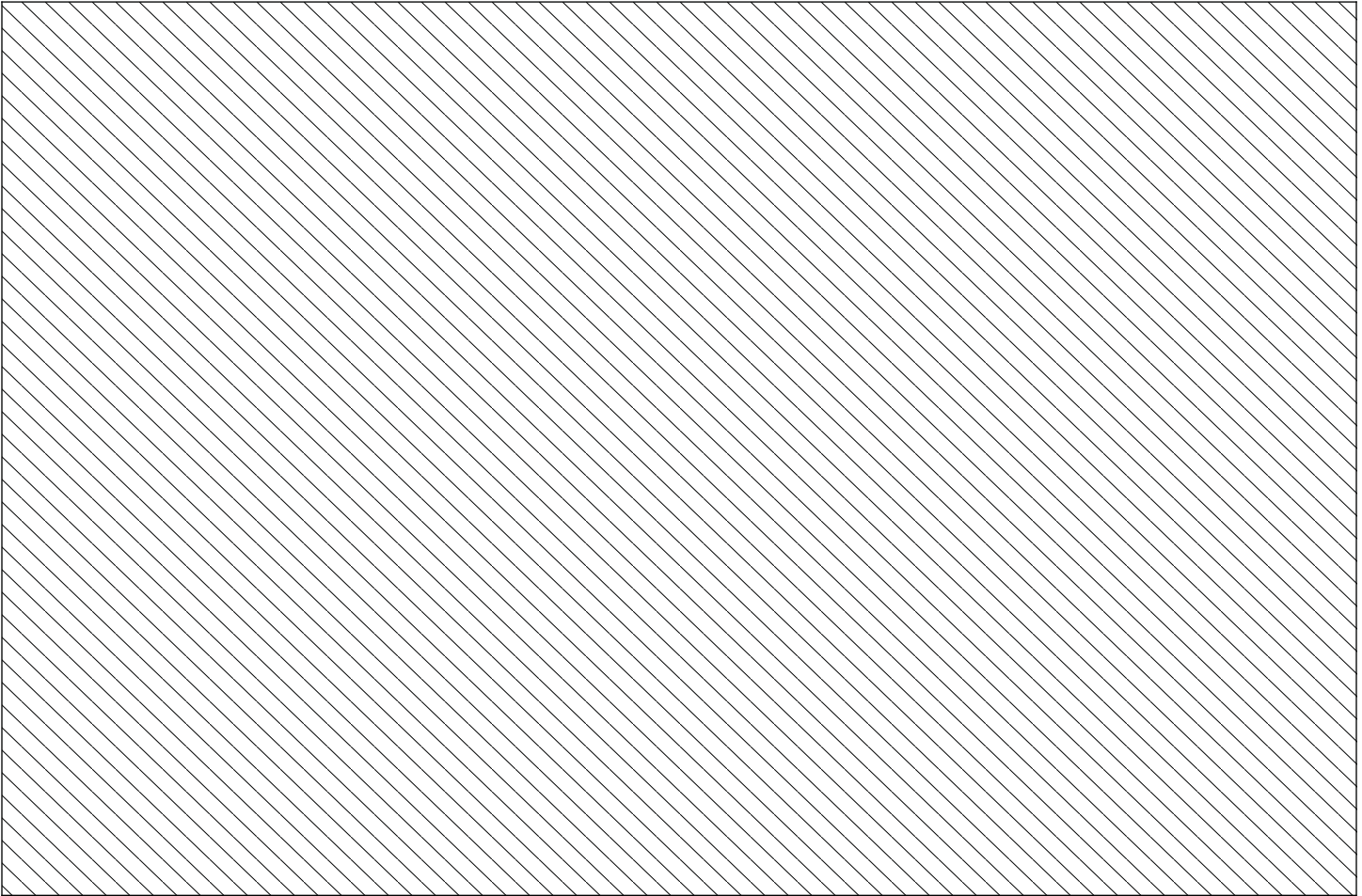
Address of Company:

Name of Project being Bid:

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Click in the field below and insert the first (1st) **color-scanned** .bmp - .jpeg - .gif - .png - .tif ID Document.



The Applicant's signature must be the same as the name appears on **all** ID Documents.
This page 2 of 5 **MUST** be signed by the SWAC Applicant and notarized with seal.

NOTARY:

Country of Citizenship:

County/State, or non U.S. equivalent:

On (date) before me (notary's name), , personally appeared (name of SWAC Applicant), , who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed on the ID Documentation (a color copy of which is provided above), and has acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the copy of the ID Documentation and this statement, executed these Documents.

Signature of SWAC Applicant

Date:

WITNESS my hand and Official Seal

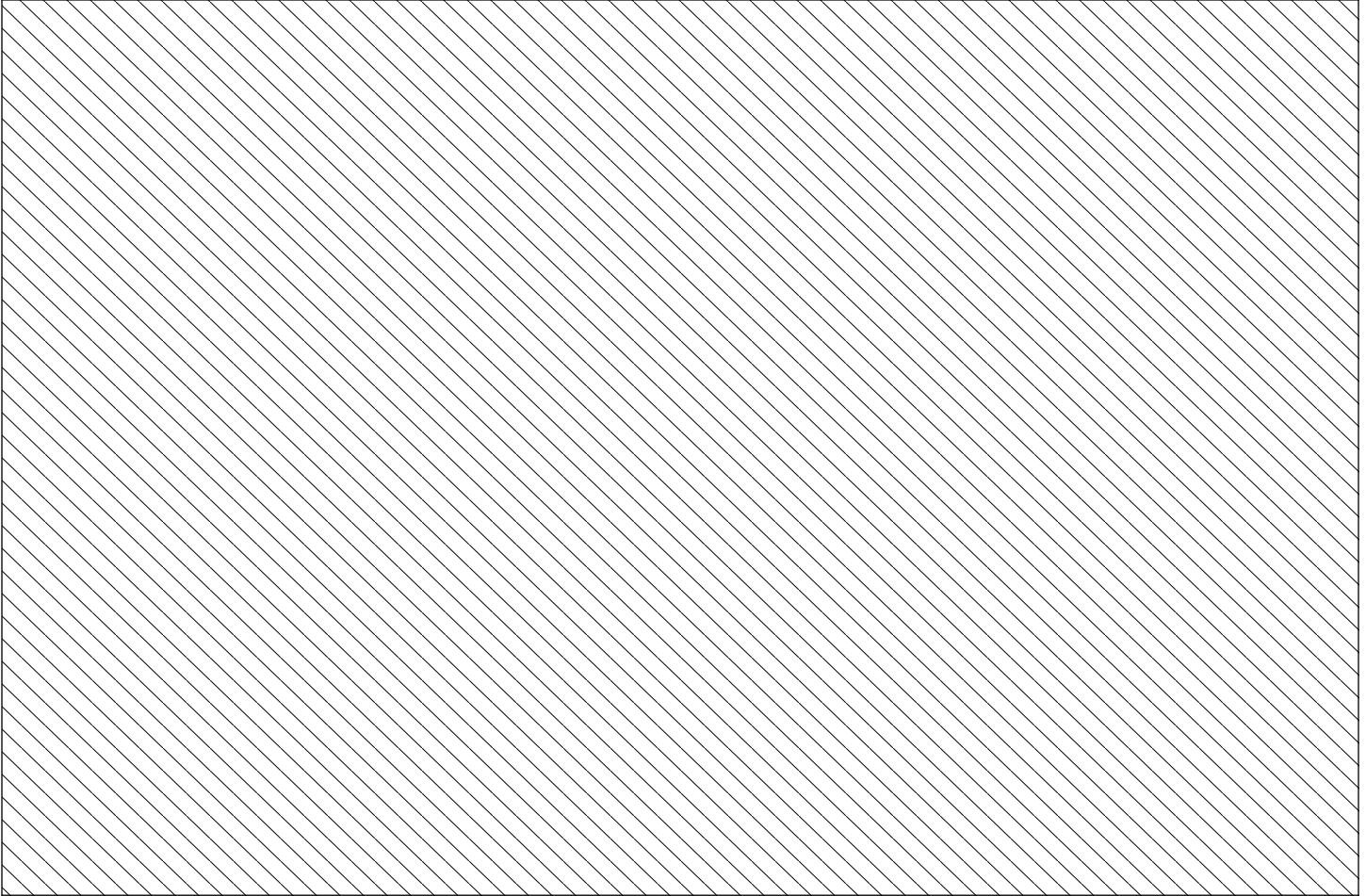
Signature of Notary Public & Seal

Date:

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Click in the field below and insert the second (2nd) **color-scanned** .bmp - .jpeg - .gif - .png - .tif ID Document.



The Applicant's signature must be the same as the name appears on **all** ID Documents.
This page 3 of 5 **MUST** be signed by the SWAC Applicant and notarized with seal.

NOTARY:

Country of Citizenship: _____

County/State, or non U.S. equivalent: _____

On (date) _____ before me (notary's name), _____, personally appeared (name of SWAC Applicant), _____, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed on the ID Documentation (a color copy of which is provided above), and has acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the copy of the ID Documentation and this statement, executed these Documents.

Signature of SWAC Applicant

Date: _____

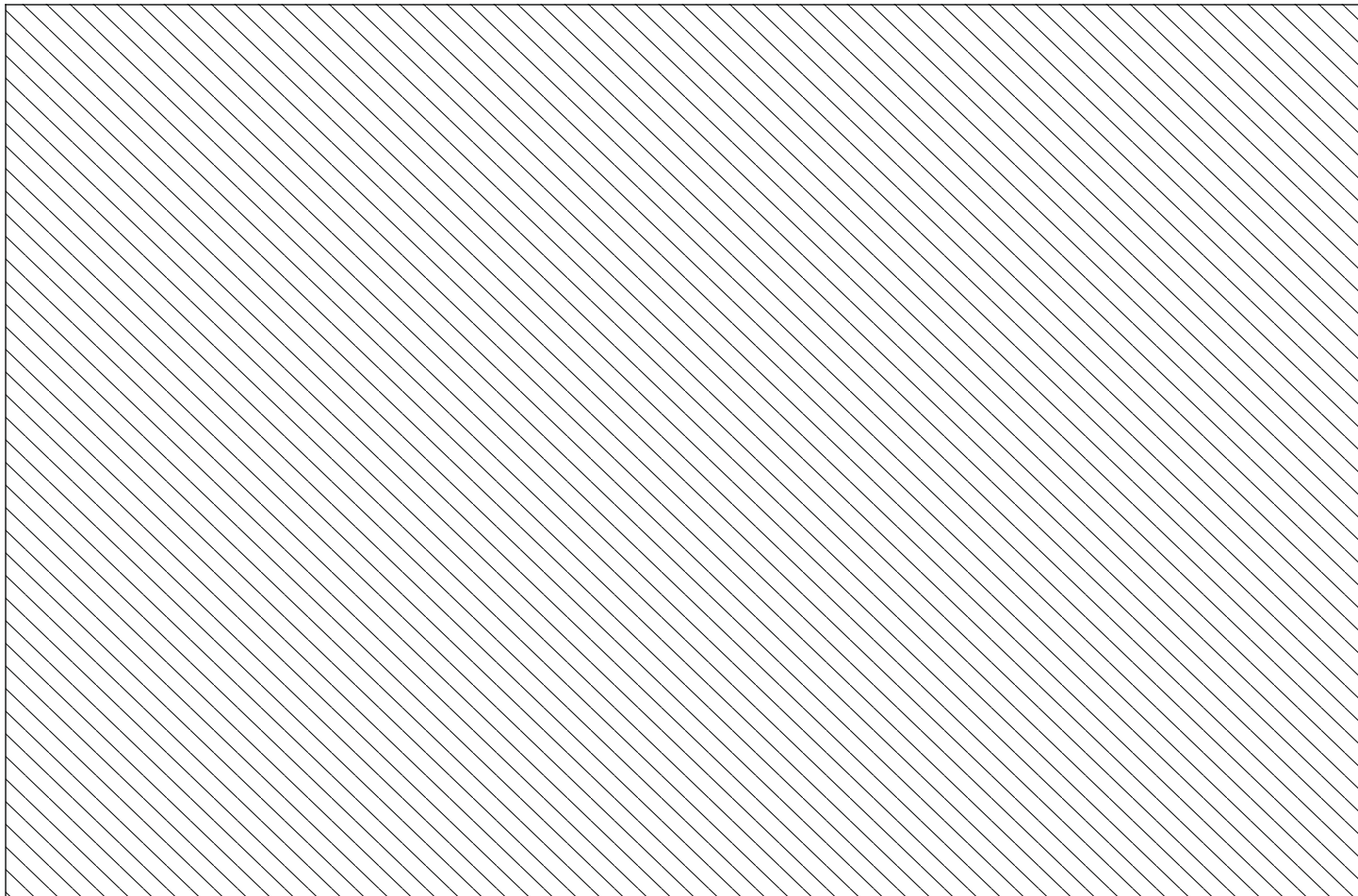
WITNESS my hand and Official Seal

Signature of Notary Public & Seal

Date: _____

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Click in the field below and insert the third (3rd) **color-scanned** .bmp - .jpeg - .gif - .png - .tif ID Document.



The Applicant's signature must be the same as the name appears on **all** ID Documents.
This page **4** of **5** **MUST** be signed by the SWAC Applicant and notarized with seal.

NOTARY:

Country of Citizenship:

County/State, or non U.S. equivalent:

On (date) before me (notary's name), , personally appeared (name of SWAC Applicant), , who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed on the ID Documentation (a color copy of which is provided above), and has acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the copy of the ID Documentation and this statement, executed these Documents.

Signature of SWAC Applicant

Date:

WITNESS my hand and Official Seal

Signature of Notary Public & Seal

Date:

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When completed, please click the **PRINT BUTTON** below and print on a **COLOR PRINTER**, sign and notarize each page (2 through 4) and submit to SWAC via overnight mail to the address below.

Please be advised that incomplete information will not be processed and may delay your SWAC Membership.

SWAC Operations Manager

Pavilions at Greentree

651 Route 73 North

Suite 309

Marlton, NJ 08053 USA

For further information, please contact SWAC Customer Service at: 1-212-608-0855