

U.S. Department of Energy CONTRACT SECURITY CLASSIFICATION SPECIFICATION (CSCS)

1. CSCS No.:	2. Previous CSCS No.:	3a. Reason for Action: (Check one) Add Change Terminate b. Item Numbers Modified: _____
4. This Specification is for: (Complete as applicable)		5. Specification Is: (Complete as applicable)
(Check one) a. Contract or Other Number Solicitation Contract Type _____ b. Contract Number _____ End Date: _____ (estimated) c. Contract Number of Prime _____ (Complete if registering or soliciting a subcontract) End Date: _____ (estimated)		a. Original (Complete date in all cases) Date: _____ b. Revised (Supersedes all previous specifications) Date: _____ c. Certificate of Possession. Retention of Classified Matter is Authorized Until Date: _____ d. Final Certificate of Non-Possession or Equivalent. Date: _____
6. General Identification of this Procurement		
7. Contractor		
a. Facility Code	b. Name, Address, and Zip Code	c. Cognizant Security Office (Name, Address, and Zip Code)
8. Prime Contractor (Complete if registering or soliciting a subcontract)		
a. Facility Code	b. Name, Address, and Zip Code	c. Cognizant Security Office (Name, Address, and Zip Code)
9. Actual Place of Performance (DOE Facilities) (Attach additional entries as necessary)		
a. Facility Code	b. Name, Address, and Zip Code	c. Cognizant Security Office (Name, Address, and Zip Code)
Actual Place of Performance (NON-DOE Facilities) (Attach additional entries as necessary)		
a. ID Code	b. Name, Address, and Zip Code	c. Cognizant Security Office (Name, Address, and Zip Code)
10. Clearance and Storage a. Classification of Matter to be Accessed: TSRD TSFRD TSNSI SRD SFRD SNSI CRD CFRD CNSI U b. Level of Storage Required at Contractor Facility in Block 7a: TSRD TSFRD TSNSI SRD SFRD SNSI CRD CFRD CNSI U c. Level of Storage for the Performance of this Contract: TSRD TSFRD TSNSI SRD SFRD SNSI CRD CFRD CNSI U d. Access Authorization/Security Clearance: Q L T S C		11. This Contract Will Require Access To: <input type="checkbox"/> OTHER DCICAVEATS <input type="checkbox"/> COMSEC <input type="checkbox"/> FGI <input type="checkbox"/> NATO <input type="checkbox"/> SCI <input type="checkbox"/> CNWDI <input type="checkbox"/> WD/SIGMAS: _____ <input type="checkbox"/> OTHER: _____
12. In Performing This Contract, The Contractor Will:		
<input type="checkbox"/> Have Access to Classified Information Only at Another Contractor's Facility or a Government Activity <input type="checkbox"/> Generate Classified Matter <input type="checkbox"/> Perform Services That Require Unescorted Access to Security Areas <input type="checkbox"/> Have Access to U.S. Classified Information Outside the U.S., Puerto Rico, U.S. Possessions and Trust Territories <input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Receive Classified Matter <input type="checkbox"/> Fabricate, Modify or Store Classified Items (e.g., Hardware or Substances) <input type="checkbox"/> Be Authorized to Use the Services of the Office of Scientific and Technical Information to Receive Classified Matter <input type="checkbox"/> Require a COMSEC Account <input type="checkbox"/> Be Authorized to Use the Defense Courier Service	

13. Classification Guidance

The classification guidance needed for this classified effort is identified below. NOTE: Guidance which is in itself classified should be referenced here and provided under separate cover.

14. Security Requirements

Security requirements are established for this contract and are identified in the following contract clauses.

DEAR 952.204-2 Security Requirements DEAR 952.204-73 Facility Clearance (Solicitation)

DEAR 952.204-70 Classification/Declassification DEAR 970.5204.1 Counterintelligence (for management contracts ONLY)

15. Surveys

DOE Surveying Office Is _____

Elements of this contract are outside the survey responsibility of the Cognizant Security Office and/or the Surveying Office.

No Yes (Identify specific areas and provide explanation/justification for each)

16. Certification and Signature. Security requirements stated herein are complete and adequate for safeguarding the classified information to be released or generated under this classified contract. All questions shall be referred to the official named below:

a. Typed Name of Procurement Request Originator	b. Title and Organization	c. Telephone (include Area Code)
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d. Address (include Zip Code)	e. Signature _____ Date _____
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17. Typed Name of Contracting Official	Signature _____ Date _____
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18. Other Approvals	Signature _____ Date _____
a. Typed Name of Classification Officer (Approval of Block 13)	Signature _____ Date _____
b. Typed Name of Special Security Officer, Office of Intelligence & Counterintelligence (Approval of Block 11 (SCI))	Signature _____ Date _____

19a. Typed Name of Local Security Officer	Signature _____ Date _____
b. Responsible Office	Signature _____ Date _____

20. Required Distribution

Contractor Administering Contracting Officer

Subcontractor Surveying Office if Different than Cognizant Security Office

Cognizant Security Office Others, as Necessary

21. General Comments:

9. Actual Place of Performance (DOE Facilities)		
a. Facility Code	b. Name, Address, and Zip Code	c. Cognizant Security Office (Name, Address, and Zip Code)
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a. Facility Code	b. Name, Address, and Zip Code	c. Cognizant Security Office (Name, Address, and Zip Code)

9. Actual Place of Performance (NON-DOE Facilities)		
a. ID Code	b. Name, Address, and Zip Code	c. Cognizant Security Office (Name, Address, and Zip Code)
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