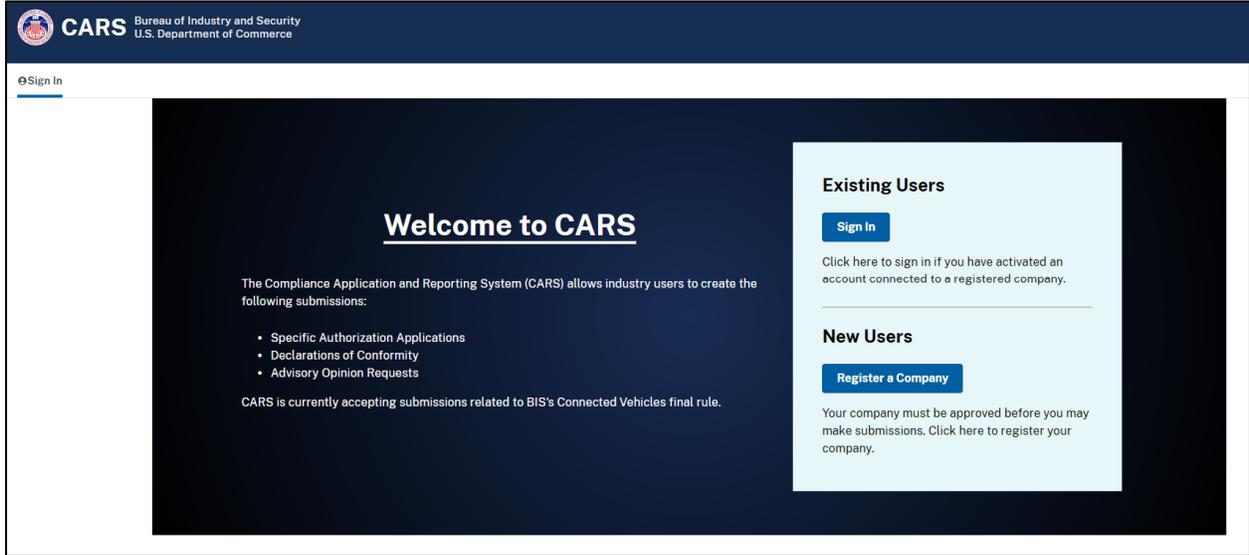


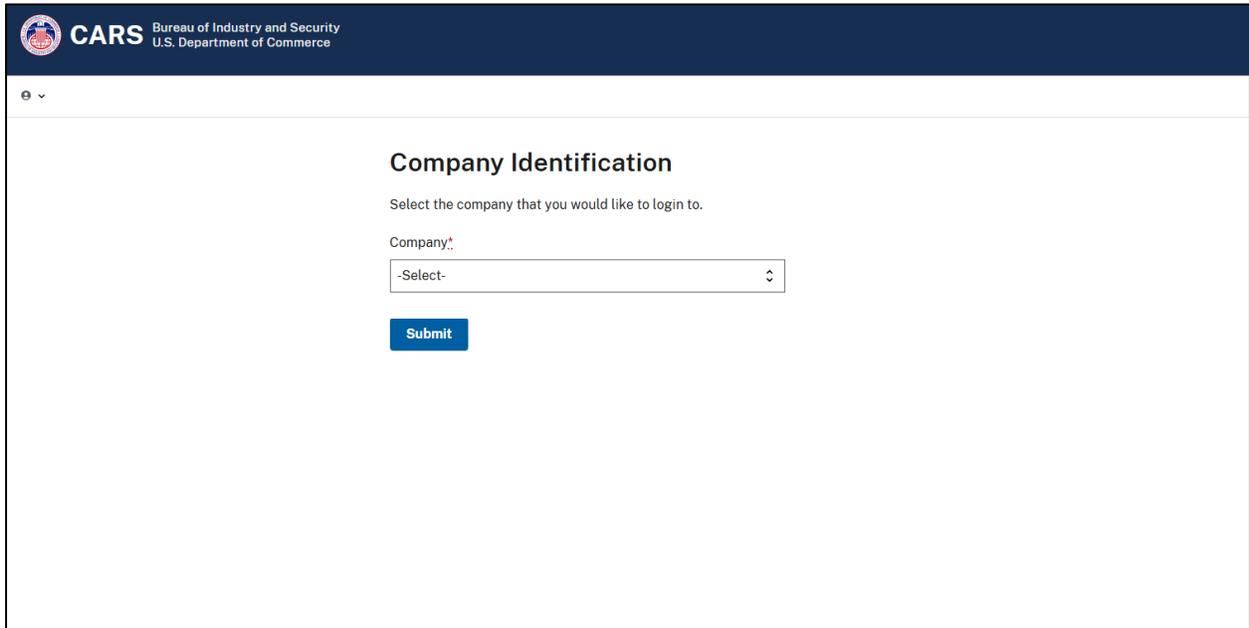
# Compliance Application and Reporting System (CARS) Connected Vehicles Rule

## Log-In Page



## Company Identification

If you are a user on more than one account, you can select the company from the dropdown menu after signing in.



## Submissions Page

Submissions <span style="float: right;">+ Create a Submission</span>							
Submission Number	Reference Name	Primary POC	Class Rule	Type	Creation Date <sup>v</sup>	Submitted Date	Status
	AO Demo	Stuart Johnson	CV	Advisory Opinion Request	03/19/2025		DRAFT
	DC Demo	Rachel Lavalle	CV	Declaration of Conformity	03/17/2025		DRAFT
	SA Demo	William McGovern	CV	Specific Authorization Application	03/17/2025		DRAFT

« First < Previous 1 of 1 Next > Last »

## Create a Submission

Submissions > Create

### Create a Submission

Enter the Reference Name and choose the type of submission you would like to create related to the Connected Vehicles final rule.

**Reference Name\***  
The name (up to 15 characters) used to reference this submission. This name will allow you to assign a unique identifier to your submission for your internal reference.

**➤ Create Specific Authorization Application**

If you are a Vehicle Connectivity System (VCS) hardware importer or connected vehicle manufacturer seeking to engage in an otherwise prohibited transaction, you must submit an application for a Specific Authorization to the Bureau of Industry and Security's Office of Information and Communications Technology and Services (OICTS) and await a decision from OICTS prior to engaging in the transaction pursuant to 15 C.F.R. § 791.307.  
[Specific Authorizations](#)

**➤ Create Declaration of Conformity**

If you are a Vehicle Connectivity System (VCS) hardware importer or a connected vehicle manufacturer engaging in a transaction involving VCS hardware or covered software that is not prohibited but has a foreign interest, you must submit a Declaration of Conformity to the Bureau of Industry and Security's Office of Information and Communications Technology and Services (OICTS) pursuant to 15 C.F.R. § 791.305.  
[Declarations of Conformity](#)

**⏴ Create Advisory Opinion Request**

If you do not know whether a transaction is subject to a prohibition or requirement under the [Connected Vehicles Rule](#), you can request that the Bureau of Industry and Security's Office of Information and Communications Technology and Services (OICTS) provide an Advisory Opinion pursuant to 15 C.F.R. § 791.310.  
[Advisory Opinions](#)

[Tell us what to improve](#)

## SUBMISSION TYPE 1: ADVISORY OPINION REQUEST

Submission for Advisory Opinion Request was created

[Submissions](#) > [Create](#) > Submission Details

### Advisory Opinion Request

Submission #: Reference: **Blank AO** OMB Control No. 0694-0145 Status: **DRAFT** [Delete Submission](#)

**Application Steps**

- 1 **Edit Details**
- 2 Check for Errors

**Disclaimers**

**PAPERWORK REDUCTION ACT STATEMENT**

This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless a valid Office of Management and Budget (OMB) control number is displayed. The OMB control number assigned to this collection is 0694-0145 (expires 3/31/2028). Send the completed form via the instructions at [bis.gov/connected-vehicles](https://bis.gov/connected-vehicles).

**BURDEN ESTIMATE AND REQUEST FOR COMMENT**

The public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, and completing and reviewing the collection of information. You may send comments regarding the burden hour estimate or any other aspect of this collection to: [CV-intake@bis.doc.gov](mailto:CV-intake@bis.doc.gov).

[Continue](#)

### Requestor Information

Pulled directly from Company Information (under Account Management).

[Submissions](#) > [Create](#) > Submission Details

### Advisory Opinion Request

Submission #: Reference: **Blank AO** OMB Control No. 0694-0145 Status: **DRAFT** [Delete Submission](#)

**Application Steps**

- 1 **Edit Details**
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

**Requestor Information**

Legal U.S. Company Name	Corporate Registration Number
<b>Connected Vehicles LLC</b>	<b>12264457</b>
Legal U.S. Company Registered Address	Address Line 2
<b>1207 S Orange Street</b>	-
City	Country
<b>Wilmington</b>	<b>USA</b>
State/Province	Postal Code
<b>DE</b>	<b>19801</b>

[Continue](#)

## Points of Contact

[Submissions](#) > [Create](#) > Submission Details

### Advisory Opinion Request

[Delete Submission](#)

Submission #:                      Reference: **Blank AO**                      OMB Control No. 0694-0145                      Status: **DRAFT**

**Application Steps**

- 1 Edit Details**
- Disclaimers
- Requestor Information
- Points of Contact**
- Parties Engaged in the Prospective Transaction(s)
- Covered Items
- Advisory Information
- Related Documents
- Other Information
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

**Points of Contact**

Click the Add POC button to enter a Point of Contact (POC).

**A primary POC is required.\***

Additional POCs are optional.

[Add POC](#)

POC	Legal Name	Email	Phone	Primary POC
No items found				

[Save and Continue](#)

After clicking “Add POC,” the following screen will appear.

### Add New Point of Contact

Legal Name\*                      Title

Affiliated Entity                      Relationship to Requestor

Nature of Relationship  
If Relationship to Requestor is "Other"

                     Email\*

Phone\*

Primary POC?

There can only be one Primary POC per submission.  
If a Primary POC already exists on this submission, selecting this checkbox will make this Point of Contact the Primary POC. The previous Primary POC will become a non-primary POC.

[Add Point of Contact](#)

## Parties Engaged in the Prospective Transaction(s)

[Submissions](#) > [Create](#) > Submission Details

### Advisory Opinion Request

Submission #:                      Reference: **Blank AO**                      OMB Control No. 0694-0145                      Status: **DRAFT**

**Application Steps**

- 1 Edit Details**
- Disclaimers
- Requestor Information
- Points of Contact
- Parties Engaged in the Prospective Transaction(s)**
- Covered Items
- Advisory Information
- Related Documents
- Other Information
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

#### Parties Engaged in the Prospective Transaction(s)

Provide all available information for parties engaged in the prospective transaction(s) for which this advisory opinion request applies.

[Add Party](#)

Party	Business Name	Transaction Role	Transaction Role Notes	Covered Item
No items found				

[Save and Continue](#)

After clicking “Add Party,” the following screen will appear.

### Add Party

Business Name\*

Identifier Type	Entity Corporate Identifiers
-Select-	<input type="text"/>

Identifier Type	Entity Corporate Identifiers
-Select-	<input type="text"/>

Identifier Type	Entity Corporate Identifiers
-Select-	<input type="text"/>

Identifier Type	Entity Corporate Identifiers
-Select-	<input type="text"/>

Address 1*	Address 2
<input type="text"/>	<input type="text"/>

City*	Country*
<input type="text"/>	United States of America (the) ▾

State/Province*	Postal Code*
-Select-	<input type="text"/>

POC Legal Name	POC Title
<input type="text"/>	<input type="text"/>

POC Email	POC Phone
<input type="text"/>	<input type="text"/>

**Ultimate Beneficial Ownership (if known)**  
For the purpose of this application, ultimate beneficial ownership is the person, corporation, partnership, association, or other organization that possesses the power, direct or indirect, whether or not exercised, through the ownership of a majority or a dominant minority of the total outstanding voting interest in an entity, board representation, proxy voting, a special share, contractual arrangements, formal or informal arrangements to act in concert, or other means, to determine, direct, or decide important matters affecting an entity.

Transaction Role*	Transaction Role Notes If "Other" is selected, detail the party's role
-Select-	<input type="text"/>

**Covered Item (Optional)**  
Detail the covered item if this application covers multiple transactions. "Covered Item" refers to VCS hardware and/or covered software that is prohibited under 15 C.F.R. § 301, et. seq.

**Save and Continue**

## Covered Items

Submissions > Create > Submission Details

### Advisory Opinion Request

Submission #:      Reference: **Blank AO**      OMB Control No. 0694-0145      Status: **DRAFT** Delete Submission

**Application Steps**

- 1 **Edit Details**
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

**Covered Items**

If known, identify the Covered Item(s) for which you are requesting an advisory opinion.  
Covered Item refers to VCS hardware and/or covered software that is prohibited under 15 C.F.R. § 301, et. seq.

Add Covered Item

Covered Item	Covered Item Name	Type	Integrated with Associated Vehicle(s)	Number of Associated Vehicles
No items found				

Save and Continue

After clicking “Add Covered Item,” the following screen will appear.

**Add Covered Item to Advisory Opinion Request** ✕

Required fields are marked with an asterisk (\*)

Covered Item Name\*

Type\*

VCS Hardware

Covered Software

Add Covered Item Reset

If the “Type” selected in VCS Hardware, the following fields will appear.

### Add Covered Item to Advisory Opinion Request

Required fields are marked with an asterisk (\*)

Covered Item Name\*

Type\*

VCS Hardware

Covered Software

VCS Hardware item is integrated with the list of associated vehicles

HTSUS Code (Optional)

**Add Covered Item** **Reset**

If the “Type” selected in Covered Software, the following fields will appear.

### Add Covered Item to Advisory Opinion Request

Required fields are marked with an asterisk (\*)

Covered Item Name\*

Type\*

VCS Hardware

Covered Software

System Enabled

**Add Covered Item** **Reset**

After adding a Covered Item, the following fields will appear.

**Associated Vehicle(s)\***  OR  **Unknown Vehicle\***

Either at least one Associated Vehicle or checking Unknown Vehicle is required.

Make	Model	Model Year	Trim	VIN Series	Edit	Delete
No items found						

After clicking “Add Associated Vehicle,” the following screen will appear.

**Add Vehicle to Advisory Opinion Request** ✕

If you would like to associate any previously created vehicles on other covered items on this submission to this covered item, select the checkbox on the corresponding vehicles and then click the Reuse Vehicle(s) button. Otherwise fill in the form below and click the Add New Vehicle button to associate a new vehicle to this covered item.

Required fields are marked with an asterisk (\*)

Select	Make	Model	Model Year	Trim	VIN Series
No items found					

OR

Make\*  Model\*

Model Year  Trim

VIN Series



After clicking “Add Document,” the following screen will appear.

The screenshot shows a modal window titled "Add Document" with a close button (X) in the top right corner. Below the title, a note states "Required fields are marked with an asterisk (\*)". The form contains the following elements:

- File\***: A "Choose File" button followed by the text "No file chosen". To the right is a checkbox labeled "Document is Confidential".
- Title\***: A text input field.
- Associated Section\***: A dropdown menu currently showing "-Select-" with a double-headed arrow icon.
- Notes**: A large, empty text area for entering notes.
- Save**: A blue button at the bottom left of the modal.

## Other Information

The screenshot displays the "Advisory Opinion Request" submission page. At the top left, there are navigation links: "Submissions" > "Create" > "Submission Details".

The main heading is "Advisory Opinion Request". In the top right corner, there is a red button labeled "Delete Submission".

Below the heading, the following information is displayed:

- Submission #: [Blank]
- Reference: Blank AO
- OMB Control No. 0694-0145
- Status: DRAFT

The page is divided into two main sections:

- Application Steps**: A vertical list of steps on the left side:
  - 1 Edit Details (highlighted with a blue circle)
  - Disclaimers
  - Requestor Information
  - Points of Contact
  - Parties Engaged in the Prospective Transaction(s)
  - Covered Items
  - Advisory Information
  - Related Documents
  - Other Information** (highlighted with a blue bar)
  - 2 Check for Errors
  - 3 Preview
  - 4 Sign & Submit
- Other Information**: A section on the right with the instruction "Please provide any other information that the requestor believes to be material to the prospective transaction (Optional)." Below this is a large text input field and a blue "Save and Continue" button.

## SUBMISSION TYPE 2: DECLARATION OF CONFORMITY

Submission for Declaration of Conformity was created

[Submissions](#) > [Create](#) > Submission Details

### Declaration of Conformity

Submission #: Reference: **Blank DC** OMB Control No. 0694-0145 Status: **DRAFT** [Delete Submission](#)

**Application Steps**

- 1 **Edit Details**
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

**Disclaimers**

**PAPERWORK REDUCTION ACT STATEMENT**

This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless a valid Office of Management and Budget (OMB) control number is displayed. The OMB control number assigned to this collection is 0694-0145 (expires 3/31/2028). Send the completed form via the instructions at [bis.gov/connected-vehicles](https://bis.gov/connected-vehicles).

**BURDEN ESTIMATE AND REQUEST FOR COMMENT**

The public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, and completing and reviewing the collection of information. You may send comments regarding the burden hour estimate or any other aspect of this collection to: [CV-intake@bis.doc.gov](mailto:CV-intake@bis.doc.gov).

[Continue](#)

### Declarant Information

Pulled directly from Company Information (under Account Management).

[Submissions](#) > [Create](#) > Submission Details

### Declaration of Conformity

Submission #: Reference: **Blank DC** OMB Control No. 0694-0145 Status: **DRAFT** [Delete Submission](#)

**Application Steps**

- 1 **Edit Details**
- 2 **Check for Errors**
- 3 Preview
- 4 Sign & Submit

**Declarant Information**

Legal U.S. Company Name	Corporate Registration Number
<b>Connected Vehicles LLC</b>	<b>12264457</b>
Legal U.S. Company Registered Address	Address Line 2
<b>1207 S Orange Street</b>	-
City	Country
<b>Wilmington</b>	<b>USA</b>
State/Province	Postal Code
<b>DE</b>	<b>19801</b>

[Continue](#)

## Points of Contact

Submissions > Create > Submission Details

### Declaration of Conformity

[Delete Submission](#)

Submission #:                      Reference: **Blank DC**                      OMB Control No. 0694-0145                      Status: **DRAFT**

**Application Steps**

- 1 **Edit Details**
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

#### Points of Contact

Click the Add POC button to enter a Point of Contact (POC).

**A primary POC is required.\***

As applicable, enter the contact information of the person who maintains the documentation and third-party assessments as later certified to in this Declaration of Conformity (i.e., Recordkeeping POC) if different than the Primary Point of Contact.\*

[Add POC](#)

POC	Legal Name	Email	Phone	Primary POC	Recordkeeping POC
No items found					

[Save and Continue](#)

\*Declarants are permitted to base a Declaration of Conformity on assessments produced by a third party, provided that the third party conforms to the requirements in 15 C.F.R. § 791.305.

After clicking “Add POC,” the following screen will appear.

### Add New Point of Contact

Legal Name\*                      Title

Affiliated Entity                      Relationship to Declarant

Nature of Relationship  
If Relationship to Declarant is "Other"

Phone\*

Primary POC?  
There can only be one Primary POC per submission.  
If a Primary POC already exists on this submission, selecting this checkbox will make this Point of Contact the Primary POC. The previous Primary POC will become a non-primary POC.

Recordkeeping POC?

[Add Point of Contact](#)

## Declaration Purpose

[Submissions](#) > [Create](#) > Submission Details

Delete Submission

Submission #:                      Reference: **Blank DC**                      OMB Control No. 0694-0145                      Status: **DRAFT**

**Application Steps**

- 1 **Edit Details**
- Disclaimers
- Declarant Information
- Points of Contact
- Declaration Purpose**
- Covered Items
- Voluntarily Provided Information
- Certifications
- Related Documents
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

**Declaration Purpose**

Indicate the purpose of this declaration: \*

**New Submission**  
 Submit a new declaration if you are a Vehicle Connectivity System (VCS) hardware importer or a connected vehicle manufacturer engaging in a transaction involving VCS hardware or covered software that is not prohibited but has a foreign interest.

**Material Change**  
 Update a previously submitted declaration due to the discovery of a material change.

**Confirmation of Accuracy**  
 Confirm the accuracy of information submitted in a previous declaration, as applied to vehicles of a new model year.

Save and Continue

## Covered Items

[Submissions](#) > [Create](#) > Submission Details

Delete Submission

Submission #:                      Reference: **Blank DC**                      OMB Control No. 0694-0145                      Status: **DRAFT**

**Application Steps**

- 1 **Edit Details**
- Disclaimers
- Declarant Information
- Points of Contact
- Declaration Purpose
- Covered Items**
- Voluntarily Provided Information
- Certifications
- Related Documents
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

**Covered Items**

Please identify and describe the covered software and/or VCS hardware for which this declaration applies.

At least one Covered Item is required\*

Add Covered Item

Covered Item	Covered Item Name	Type	Integrated with Associated Vehicle(s)	Number of Associated Vehicles
No items found				

Save and Continue

After clicking “Add Covered Item,” the following screen will appear.

**Add Covered Item to Declaration of Conformity** ✕

Required fields are marked with an asterisk (\*)

Covered Item Name\*

Type\*

VCS Hardware

Covered Software

**Add Covered Item** **Reset**

If the “Type” selected in VCS Hardware, the following fields will appear.

**Add Covered Item to Declaration of Conformity** ✕

Required fields are marked with an asterisk (\*)

Covered Item Name\*

Type\*

VCS Hardware

Covered Software

VCS Hardware item is integrated with the list of associated vehicles

FCC ID (if known) HTSUS Code (Optional)

**Add Covered Item** **Reset**

If the “Type” selected in Covered Software, the following fields will appear.

✕

### Add Covered Item to Declaration of Conformity

Required fields are marked with an asterisk (\*)

Covered Item Name\*

Type\*

VCS Hardware

Covered Software

Please detail the covered software.\*

**Add Covered Item**Reset

After adding a Covered Item, the following fields will appear.

**Associated Vehicle(s)\*** + Add Associated Vehicle OR  Unknown Vehicle\*

Either at least one Associated Vehicle or checking Unknown Vehicle is required.

Make	Model	Model Year	Trim	VIN Series	Edit	Delete
No items found						

After clicking “Add Associated Vehicle,” the following screen will appear.

### Add Vehicle to Declaration of Conformity

If you would like to associate any previously created vehicles on other covered items on this submission to this covered item, select the checkbox on the corresponding vehicles and then click the Reuse Vehicle(s) button. Otherwise fill in the form below and click the Add New Vehicle button to associate a new vehicle to this covered item.

Required fields are marked with an asterisk (\*)

Select	Make	Model	Model Year	Trim	VIN Series
No items found					

OR

Make\*  Model\*

Model Year  Trim

VIN Series

## Voluntarily Provided Information

[Submissions](#) > [Create](#) > Submission Details

### Declaration of Conformity

Submission #: Reference: Blank DC OMB Control No. 0694-0145 Status: **DRAFT**

#### Application Steps

- 1 Edit Details**
- Disclaimers
- Declarant Information
- Points of Contact
- Declaration Purpose
- Covered Items
- Voluntarily Provided Information**
- Certifications
- Related Documents
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

#### Voluntarily Provided Information

Please provide any additional information not requested in this form.

Additional Information (Optional)

# Certifications

## Declaration of Conformity

Delete Submission

Submission #:
Reference: **Blank DC**
OMB Control No. 0694-0145
Status: **DRAFT**

### Application Steps

- 1 **Edit Details**
- Disclaimers
- Declarant Information
- Points of Contact
- Declaration Purpose
- Covered Items
- Voluntarily Provided Information
- Certifications**
- Related Documents
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

### Certifications

Required fields are marked with an asterisk (\*)

(1) Do you certify, on behalf of the Declarant, that the VCS hardware or covered software identified in this declaration of conformity is not designed, developed, manufactured, or supplied by persons owned by, controlled by, or subject to the jurisdiction or direction of the People's Republic of China or Russian Federation?\*

Yes

No

(2) Do you certify, on behalf of the Declarant, that due diligence (with or without the use of third-party assessments) has been conducted to inform the above certification, and the Declarant or a delegated third party maintains documents and third-party assessments (as applicable) which can be made available upon request by the Department(\*) sufficient to demonstrate the above certification?\*

Yes

No

(3) **For Covered Software Transactions:** Do you certify that the Declarant or delegated third-party maintains documents and third-party assessments, which can be made available upon request by the Department, sufficient to identify, at minimum, the author's name, timestamp, component name, and supplier name of all proprietary additions to the development of the covered software?\*

Yes

No

Not Applicable

(4) Do you certify that the Declarant has taken all possible measures, either contractually or otherwise, to ensure any necessary documentation and assessments from suppliers will be furnished to the Department upon request either by the Declarant, or in cases including confidential business information, directly by the supplier?\*

Yes

No

Please ensure the point of contact(s) who maintain the documentation and third-party assessments (as applicable) as certified above are marked as a Recordkeeping POC. If your POC is not displayed or marked as a Recordkeeping POC, please return to the Points of Contact page to add or edit the POC.

POC	Legal Name	Email	Phone	Primary POC	Recordkeeping POC
No items found					

Save and Continue

(\*)Declarants are permitted to base a Declaration of Conformity on assessments produced by a third party, provided that the third party conforms to the requirements in 15 C.F.R. § 791.305.

## Related Documents

[Submissions](#) > [Create](#) > Submission Details

### Declaration of Conformity

Submission #:      Reference: **Blank DC**      OMB Control No. 0694-0145      Status: **DRAFT** [Delete Submission](#)

#### Application Steps

- 1 Edit Details**
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

#### Related Documents

[+ Add Document](#)

No Related Documents found

[Save and Continue](#)

- Disclaimers
- Declarant Information
- Points of Contact
- Declaration Purpose
- Covered Items
- Voluntarily Provided Information
- Certifications
- Related Documents**

After clicking “Add Document,” the following screen will appear.

### Add Document

Required fields are marked with an asterisk (\*)

**File\***  
 No file chosen       Document is Confidential

**Title\***      **Associated Section\***  
     

**Notes**

## SUBMISSION TYPE 3: SPECIFIC AUTHORIZATION APPLICATION

Submission for Specific Authorization Application was created

[Submissions](#) > [Create](#) > Submission Details

### Specific Authorization Application

Submission #: Reference: **Blank SA** OMB Control No. 0694-0145 Status: **DRAFT** [Delete Submission](#)

**Application Steps**

- 1 Edit Details
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

**Disclaimers**

**PAPERWORK REDUCTION ACT STATEMENT**

This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless a valid Office of Management and Budget (OMB) control number is displayed. The OMB control number assigned to this collection is 0694-0145 (expires 3/31/2028). Send the completed form via the instructions at [bis.gov/connected-vehicles](https://bis.gov/connected-vehicles).

**BURDEN ESTIMATE AND REQUEST FOR COMMENT**

The public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, and completing and reviewing the collection of information. You may send comments regarding the burden hour estimate or any other aspect of this collection to: [CV-intake@bis.doc.gov](mailto:CV-intake@bis.doc.gov).

[Continue](#)

### Applicant Information

Pulled directly from Company Information (under Account Management).

[Submissions](#) > [Create](#) > Submission Details

### Specific Authorization Application

Submission #: Reference: **Blank SA** OMB Control No. 0694-0145 Status: **DRAFT** [Delete Submission](#)

**Application Steps**

- 1 Edit Details
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

**Applicant Information**

Legal U.S. Company Name	Corporate Registration Number
<b>Connected Vehicles LLC</b>	<b>12264457</b>
Legal U.S. Company Registered Address	Address Line 2
<b>1207 S Orange Street</b>	-
City	Country
<b>Wilmington</b>	<b>USA</b>
State/Province	Postal Code
<b>DE</b>	<b>19801</b>

**Significant Ownership Interests\***

For the purpose of this application, a "significant ownership interest" is defined as any ownership interest, either direct, indirect, or in aggregate, that allows a person to exercise control over the business. You may include in your response a corporate ownership chart detailing any significant upstream indirect ownership interests, as applicable or as needed. For examples of helpful documentation you can submit in relation to a description of ownership, refer to the What documentation should I submit in support of my Specific Authorization Application? FAQ [here](#).

[Save and Continue](#)

## Points of Contact

Submissions > Create > Submission Details

### Specific Authorization Application

[Delete Submission](#)

Submission #:                      Reference: **Blank SA**                      OMB Control No. 0694-0145                      Status: **DRAFT**

#### Application Steps

- 1 **Edit Details**
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

#### Points of Contact

Click the Add POC button to enter a Point of Contact (POC).

**A primary POC is required.\***

Additional POCs are optional.

[Add POC](#)

POC	Legal Name	Email	Phone	Primary POC
No items found				

[Save and Continue](#)

After clicking “Add POC,” the following screen will appear.

### Add New Point of Contact

Legal Name\*  Title

Affiliated Entity  Relationship to Applicant

Nature of Relationship  
If Relationship to Applicant is "Other"  Email\*

Phone\*

Primary POC?

There can only be one Primary POC per submission. If a Primary POC already exists on this submission, selecting this checkbox will make this Point of Contact the Primary POC. The previous Primary POC will become a non-primary POC.

[Add Point of Contact](#)

## Prior Declaration of Conformity

[Submissions](#) > [Create](#) > Submission Details

### Specific Authorization Application

[Delete Submission](#)

Submission #:                      Reference: **Blank SA**                      OMB Control No. 0694-0145                      Status: **DRAFT**

#### Application Steps

- 1 Edit Details**
- Disclaimers
- Applicant Information
- Points of Contact
- Prior Declaration of Conformity**
- Application Type
- Parties Engaged in Otherwise Prohibited Transaction(s)
- Covered Items
- Internal Controls
- Voluntarily Provided Information
- Related Documents
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

#### Prior Declaration of Conformity

Pursuant to 15 CFR Part 791.305(f), if a connected vehicle manufacturer or VCS hardware importer determines that articles subject to a Declaration of Conformity are no longer eligible, it must, within 30 days, cease any prohibited conduct and submit a specific authorization application. If this is the reason for your specific authorization application, please associate the previous Declaration of Conformity below.

-Select-

[Save and Continue](#)

## Application Type

[Submissions](#) > [Create](#) > Submission Details

### Specific Authorization Application

[Delete Submission](#)

Submission #:                      Reference: **Blank SA**                      OMB Control No. 0694-0145                      Status: **DRAFT**

#### Application Steps

- 1 Edit Details**
- Disclaimers
- Applicant Information
- Points of Contact
- Prior Declaration of Conformity
- Application Type**
- Parties Engaged in Otherwise Prohibited Transaction(s)
- Covered Items
- Internal Controls
- Voluntarily Provided Information
- Related Documents
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

#### Application Type

Required fields are marked with an asterisk (\*)

Is the entity filing this Specific Authorization Application engaged in related prohibited transactions with respect to 15 CFR § 791.304?\*

Yes

No

[Save and Continue](#)

## Parties Engaged in Otherwise Prohibited Transaction(s)

[Submissions](#) > [Create](#) > Submission Details

### Specific Authorization Application

Submission #:                      Reference: **Blank SA**                      OMB Control No. 0694-0145                      Status: **DRAFT** [Delete Submission](#)

**Application Steps**

- 1 Edit Details**
- Disclaimers
- Applicant Information
- Points of Contact
- Prior Declaration of Conformity
- Application Type
- Parties Engaged in Otherwise Prohibited Transaction(s)**
- Covered Items
- Internal Controls
- Voluntarily Provided Information
- Related Documents
- 2 Check for Errors
- 3 Preview
- 4 Sign & Submit

#### Parties Engaged in Otherwise Prohibited Transaction(s)

Provide the following information for all parties engaged in the prohibited transaction(s) for which the applicant is requesting a specific authorization.

**At least one Party is required.\***

*For VCS Hardware Transactions:* If applicable, please ensure to include any party information for all prohibited subcomponent transactions.

[Add Party](#)

Party	Business Name	Transaction Role	Transaction Role Notes	Covered Item
No items found				

[Save and Continue](#)

After clicking “Add Party,” the following screen will appear.

### Add Party

Business Name\*

Identifier Type	Entity Corporate Identifiers
-Select-	<input type="text"/>

Identifier Type	Entity Corporate Identifiers
-Select-	<input type="text"/>

Identifier Type	Entity Corporate Identifiers
-Select-	<input type="text"/>

Identifier Type	Entity Corporate Identifiers
-Select-	<input type="text"/>

Address 1*	Address 2
<input type="text"/>	<input type="text"/>

City*	Country*
<input type="text"/>	United States of America (the) <input type="text"/>

State/Province*	Postal Code*
-Select-	<input type="text"/>

POC Legal Name	POC Title
<input type="text"/>	<input type="text"/>

POC Email	POC Phone
<input type="text"/>	<input type="text"/>

**Ultimate Beneficial Ownership (if known)**  
For the purpose of this application, ultimate beneficial ownership is the person, corporation, partnership, association, or other organization that possesses the power, direct or indirect, whether or not exercised, through the ownership of a majority or a dominant minority of the total outstanding voting interest in an entity, board representation, proxy voting, a special share, contractual arrangements, formal or informal arrangements to act in concert, or other means, to determine, direct, or decide important matters affecting an entity.

Transaction Role*	Transaction Role Notes If "Other" is selected, detail the party's role
-Select-	<input type="text"/>

**Covered Item (Optional)**  
Detail the covered item if this application covers multiple transactions. "Covered Item" refers to VCS hardware and/or covered software that is prohibited under 15 C.F.R. § 301, et. seq.

**Save and Continue**

## Covered Items

[Submissions](#) > [Create](#) > Submission Details

### Specific Authorization Application

[Delete Submission](#)

Submission #:                      Reference: **Blank SA**                      OMB Control No. 0694-0145                      Status: **DRAFT**

**Application Steps**

- Edit Details**
- Check for Errors
- Preview
- Sign & Submit

**Covered Items**

Identify the Covered Item(s) for which this application seeks authorization.

Covered Item refers to VCS hardware and/or covered software that is prohibited under 15 C.F.R. § 301, et. seq.

[Add Covered Item](#)

Covered Item	Covered Item Name	Type	Integrated with Associated Vehicle(s)	Number of Associated Vehicles
No items found				

[Save and Continue](#)

After clicking “Add Covered Item,” the following screen will appear.

#### Add Covered Item to Specific Authorization Application

Required fields are marked with an asterisk (\*)

Covered Item Name\*

Type\*

VCS Hardware

Covered Software

Detail how the item directly enables the function of the system.\*

Describe the nature of the design, development, manufacture, or supply (including assembling and packaging) of the above covered software item made by an entity owned by, controlled by, or subject to the jurisdiction or direction of the PRC or Russia.\*

[Add Covered Item](#)   [Reset](#)

If the “Type” selected in VCS Hardware, the following fields will appear.

✕

### Add Covered Item to Specific Authorization Application

Required fields are marked with an asterisk (\*)

Covered Item Name\*

Type\*

VCS Hardware

Covered Software

VCS Hardware item is integrated with the list of associated vehicles

HTSUS Code (Optional)

Detail how the item directly enables the function of the system.\*

Describe the nature of the design, development, manufacture, or supply (including assembling and packaging) of the above VCS hardware item made by an entity owned by, controlled by, or subject to the jurisdiction or direction of the PRC or Russia.\*

Add Covered Item

Reset

If the “Type” selected in Covered Software, the following fields will appear.

✕

### Add Covered Item to Specific Authorization Application

Required fields are marked with an asterisk (\*)

Covered Item Name\*

Type\*

VCS Hardware

Covered Software

System Enabled\*

Detail how the item directly enables the function of the system.\*

Describe the nature of the design, development, manufacture, or supply (including assembling and packaging) of the above covered software item made by an entity owned by, controlled by, or subject to the jurisdiction or direction of the PRC or Russia.\*

**Add Covered Item**Reset

After adding a Covered Item, the following fields will appear.

**Associated Vehicle(s)\*:** + Add Associated Vehicle OR  Unknown Vehicle\*

Either at least one Associated Vehicle or checking Unknown Vehicle is required.

Make	Model	Model Year	Trim	VIN Series	Edit	Delete
No items found						

After clicking “Add Associated Vehicle,” the following screen will appear.

✕

### Add Vehicle to Specific Authorization Application

If you would like to associate any previously created vehicles on other covered items on this submission to this covered item, select the checkbox on the corresponding vehicles and then click the Reuse Vehicle(s) button. Otherwise fill in the form below and click the Add New Vehicle button to associate a new vehicle to this covered item.

Required fields are marked with an asterisk (\*)

Select	Make	Model	Model Year	Trim	VIN Series
No items found					

Reuse Vehicle(s) OR

Make\*  Model\*

Model Year  Trim

VIN Series

Add New Vehicle Reset

## Internal Controls

### Specific Authorization Application

[Delete Submission](#)

Submission #:                      Reference: **Blank SA**                      OMB Control No. 0694-0145                      Status: **DRAFT**

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#### Application Steps

- 1 Edit Details**
- Disclaimers
- Applicant Information
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- Application Type
- Parties Engaged in Otherwise Prohibited Transaction(s)
- Covered Items

#### Internal Controls

Required fields are marked with an asterisk (\*)

**Internal Controls Assessment\***  
Provide an assessment (internal or third-party) of the applicant's ability to limit PRC or Russian government interference, including any controls and procedures that the applicant has in place, or will immediately deploy, to mitigate any PRC or Russian government control or influence over the design, development, manufacture, or supply of the VCS hardware and/or covered software.

#### Internal Controls

**Security Standards Used\***  
Describe any security standards used by the applicant with respect to the VCS hardware and/or covered software within the prohibited transaction(s).

#### Internal Controls

**Other Applicable Actions\***  
Please describe any other actions and proposals, such as technical controls (e.g., software validation, replacement supplier, etc.) or operational controls (e.g., physical and logical access monitoring procedures) the applicant has implemented, or intends to implement to address any undue or unacceptable national security risks stemming from the identified supply chain element under potential PRC or Russian government control or influence.

[Save and Continue](#)



After clicking “Add Document,” the following screen will appear.

✕

### Add Document

Required fields are marked with an asterisk (\*)

File\*

No file chosen

Document is Confidential

Title\*

Associated Section\*

-Select- ⌵

Notes

**Save**