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**5. Type of visit (Select one from each column)**

Name

**7. Anticipated level of classified information to be involved**

**6. Subject to be discussed**

By invitation of the facility to be visited

Initiated by request or facility

Commercial initiative

Government initiative

**4. Date of visit**

Address

**3. Government agency or industrial facility to be visited**

To

Requestor

**1. Administrative data**

Postal address

**2. Requesting government agency or industrial facility**

Name

Requestor

**REQUEST FOR VISIT**

**for visitors to the Swedish Armed Forces**

Top Secret

Secret

Confidential

Restricted

Unclassified

Date

Visit ID

Emergency

Recurring

One Time

Departure (YY/MM/DD)

Arrival (YY/MM/DD)

Telephone

Point of contact

Telefax

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Security clearance

ID/PP number

Security clearance

Date of birth

Name

Rank

Company/agency

Nationality

ID/PP number

Nationality

Date of birth

Name

Continue on additional sheet

Rank

**REQUEST FOR VISIT**

**for visitors to the Swedish Armed Forces**

Company/agency

Nationality

Company/agency

Rank

Company/agency

Nationality

ID/PP number

Security clearance

Date of birth

Name

Rank

ID/PP number

Nationality

ID/PP number

Security clearance

Date of birth

Name

Rank

Company/agency

Security clearance

Date of birth

Name

**8. Particulars of visitors**

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Address

Yes

Yes

Yes

Military Vehicle

Civilian Vehicle

Weapons

Uniform

b. Visitor(s) will use

a. Visitor(s) will carry

Signature

Telephone

Yes

Name

Signature

Telephone

Address

Name

STAMP

STAMP

**13. Further information**

**12. Remarks**

**11. Requesting national/designated security authority**

Public Train

No

Yes

No

Yes

No

Yes

No

Yes

Naval unit or vessel

Military aircraft

Commercial airline

**10. Certification of clearance**

**REQUEST FOR VISIT**

**for visitors to the Swedish Armed Forces**

Signature

Telephone

Name

**9. The security office of the requesting government agency or industrial facility**

No

No

No

No

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