**ILNAS/ANCC/F020**

**CAB authorisation request**

Modifications : initial version

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# Introduction

## Context of this document

This form is to be used in case a conformity assessment body intends to be authorised by the NCCA (ILNAS) to carry out the tasks under a European cybersecurity certification scheme. A version of this form shall be completed separately by the CB and its related ITSEF.

The supervision procedure of the conformity assessment body (hereinafter, “supervision scheme”) under the Cybersecurity Act that is applied by ILNAS is described in the ILNAS/ANCC/Pr001 procedure – National Supervision Scheme.

The NCCA undertakes to respect the confidentiality of the information provided in the questionnaire and all the attached documents.

The documents submitted to the NCCA will not be sent to third parties by the NCCA without the prior written agreement of the conformity assessment body, except in case of a legal enquiry that falls within the framework of the CSA.

The conformity assessment body is responsible for keeping the NCCA up to date concerning the information provided in this request form.

All the documents relating to the way in which the NCCA operates can be found on the website of ILNAS: [https://portail-qualite.public.lu](https://portail-qualite.public.lu/fr.html)

## Processing of personal data

ILNAS undertakes to respect the confidentiality of the information provided in this form and the supporting documents, in accordance with the Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation - GDPR).

The information submitted via this form will be collected by the NCCA as the body responsible for carrying out supervision activities in accordance with the Cybersecurity Act.

The collection and storage of the data provided via this form is necessary for the supervision of certification holders or EU statement of conformity holders. No further processing of the submitted data will be carried out. The information submitted via this form will only be stored during the time the supervision is ongoing and for a period of 10 years after the supervision has ended.

Any person referred to in this form has the right, at any time, to consult and to rectify the data stored about him/her as well as to obtain a copy of the data, to request its deletion, to ask for its processing to be restricted or to object to the processing of the data. Requesting the deletion of the data, asking for its processing to be restricted, or objecting to the processing of the data may lead to the withdrawal of the certificate or the EU statement of conformity.

For exercising these rights, please contact the NCCA by using the contact details provided in the form. Complaints may also be lodged with the National Commission for Data Protection (CNPD), having its headquarters at 15, Boulevard du Jazz, L-4370 Belvaux. The data protection officer of ILNAS can be contacted via the following e-mail address: dpo@ilnas.etat.lu

# Description of the organisation

This section intends to collect information to describe the conformity assessment body.

## General information of the organisation

The aim of this section is to collect general information about the organisation under whose control the conformity assessment body operates.

### Identification of the organisation

Information regarding the identification of the organisation, as registered in the national trade and business register (RCS), under whose control the conformity assessment body operates.

Name:

No. and street:

City:

Country:

Postcode:

Postal address

Legal representative (name):

Position of the legal representative:

Company type:

Legal status:

Trade register no.:

VAT register no.:

Telephone number:

Web site:

E-mail:

### General activities of the organisation

Please indicate the main activities performed by the organisation below.

### Organisational aspects

Is your organisation part of a group?

Yes [ ]  Group:

No [ ]

Does the organisation have any subsidiaries?

Yes [ ]

No [ ]

If yes, please list your subsidiaries:

## Information of the conformity assessment body

The aim of this section is to collect information about the conformity assessment body, its activities and structure.

### Type of conformity assessment body

What type of organisation is concerned? (please choose CB or ITSEF)

Certification Body (CB): [ ]

IT Security Evaluation Facility (ITSEF): **[ ]** Name of the related CB:

### Identification of the organisation

Please fill in the information required to identify the conformity assessment body, **only if it is** **different from the organisation identified in Section 2.1**.

Name:

No. and street:

City:

Country:

Postcode:

Postal address

Telephone number:

Web site:

E-mail:

### Activities of the organisation

Please indicate the main activities performed by the conformity assessment body.

### ITSEF location (only applicable for multi-site ITSEF’s authorisation request)

Name:

No. and street:

City:

Country:

Postcode:

Postal address:

Telephone number:

Web site:

E-mail:

Relevant ITSEF activities:

Please duplicate the above section if you have to mention additional testing laboratories (ITSEF) locations.

# Information for supervision

## General information regarding the supervision

This section intends to collection information that is essential for the NCCA to carry out its supervision activities.

What type of European cybersecurity certification scheme is concerned?

EUCC: [ ]

Which ICT product(s) or protection profile(s) is(are) in the scope of your conformity assessment activity?

## Management

Please indicate the person(s) that is/are in charge of the organisation.

Person 1.

Full name:

Phone:

Email:

Person 2.

Full name:

Phone:

Email:

Person 3.

Full name:

Phone:

Email:

## Personnel

How many employees are working for your organisation in total?

How many employees fall within the scope of the CAB authorisation request?

## Reference language

What is your preferred language for communication (email, phone, etc.)?

Which language is your formal documentation written in?

## Contact information for the NCCA

Please provide the name and contact information of the person to be contacted by the NCCA. In case this information has already been provided above, simply indicate the name of the person.

You can also provide multiple contacts, depending on their positions and responsibilities.

Full name:

Position/responsibility:

Phone:

Email:

Full name:

Position/responsibility:

Phone:

Email:

Full name:

Position/responsibility:

Phone:

Email:

Full name:

Position/responsibility:

Phone:

Email:

# Documents to be attached to this request form

The following documents have to be attached to this form

* The information mentioned in Annex 1 point 4. of the ENISA authorisation of CBs and ITSEFs guidelines version 0.7 (available on Enisa website[[1]](#footnote-1))
* Registration of the company in the national trade and business register (RCS)
* VAT registration

Please note that the NCCA might request additional information that it considers necessary for demonstrating the compliance with the applicable requirements.

The duly completed and electronically signed request form (File > Info> Protect Document > Add a Digital Signature), together with the documents indicated in Section 4, should be encrypted[[2]](#footnote-2) and emailed to supervision-cybersecurite@ilnas.etat.lu.

1. <https://certification.enisa.europa.eu/certification-library_en> [↑](#footnote-ref-1)
2. <https://portail-qualite.public.lu/fr/cybersecurity-act/ncca/contact-ncca.html> [↑](#footnote-ref-2)