

# Instructions for completing the DLA Form 1822, End-Use Certificate (EUC)

For the DoD Computers For Learning (CFL) Program

**DODD 2030.8 requires that Trade Security Controls be implemented whenever United States Munitions List (USML) or Commerce Control List (CCL) property is transferred. Trade Security Controls are implemented to prevent the illegal acquisition or other unauthorized transfers of USML or CCL items to ineligible transferees. These controls include the requirement to notify purchasers of export license requirements and the requirement that purchasers complete end-use certificates. All individuals wanting to acquire Department of Defense surplus property, identified as USML or CCL items, are required to complete the End-Use Certificate (EUC), DLA Form 1822.**

Due to the critical nature of this document, failure to comply with any of these instructions and/or accurately provide the required information will result in this EUC being deemed unacceptable and will cause significant delay or denial in obtaining the Trade Security Control (TSC) assessment required to receive USML/CCL property. It is your responsibility to accurately complete this form.

- As part of the TSC assessment process, personal identification information is necessary via one of the following: U.S. Government ID, U.S. Passport, Valid Driver's License, State Government ID, Green Card, or Naturalization Papers. **\*\*Please ensure you scan or email a LEGIBLE copy of your identification.**
- All entries must be typed or clearly printed.
- If additional space is needed for the required information, the use of a separate sheet of paper is acceptable. Please put your name on any additional papers.
- Every block must have an entry; some blocks have been pre-populated for the CFL Program. If the information being requested does not apply to your situation, ONLY use the following entries: "NONE", "DOES NOT APPLY", or "NOT APPLICABLE". **\*\* Do not use N/A, N/R, or draw a line through the entry.**
- If you have to repeat information that was previously entered in another block, cite the SECTION, block number and/or letter, i.e. "Same as Section X, Block X."
- The approving official (Principle, Superintendent, or Executive/Administrator) will review the EUC for completeness and accuracy.

**The individual signing the form will provide their information as requested:**

**NAME: Last, First, Middle** – Please print/type your complete legal name. Provide last name, complete first name (initials for first name will not be accepted) and middle name (if any).

**\*\* If you do not have a middle name, use NMN (No Middle Name).**

**SSN/ALIEN CARD NO/COUNTRY ID:** Your FULL Social Security Number is required.

**DATE OF BIRTH:** Enter as Month/Day/Year (MM/DD/YY).

**PLACE OF BIRTH: (City or County, State, Country).** City and County names MUST be spelled out. Only the two-letter (or standard) abbreviation for the state and Country is acceptable.

**TELEPHONE NUMBER:** Daytime phone number including area code.

**MAILING ADDRESS:** Enter your mailing address. This may be your business address, home address, or a Post Office (PO) Box. Street and City names MUST be spelled out. The only abbreviations acceptable are the two-letter (or standard) for the State or Country.

**PHYSICAL ADDRESS:** Enter your **personal** physical address. Street and City names MUST be spelled out. The only abbreviations acceptable are the two-letter (or standard) for the State or Country. **\*\* Post Office (PO) Boxes are NOT acceptable.** If your physical address is the same as your mailing address, you may enter: “Same as Mailing Address.”

## **SECTION I. GENERAL INFORMATION**

1. **TYPE OF FIRM:** Pre-populated as “Other”, “School”
2. **NATURE OF END-USER’S BUSINESS:** Pre-populated as “Education”
3. **NATURE OF PRINCIPAL’S BUSINESS:** Pre-populated as “Education”
4. **FIRM’S ID/FEDERAL TAX NUMBER:** Enter: “NONE” or “DOES NOT APPLY” or “NOT APPLICABLE”. **\*\* Do not use N/A, N/R, or draw a line through the entry.**
5. **BUSINESS/CORPORATION HEADQUARTERS**
  - a. **NAME:** Enter the **FULL** name of the school with **no abbreviations**.
  - b. **ADDRESS:** Enter the **FULL** address **and phone number** of the school. Street and City names MUST be spelled out. The only abbreviations acceptable are the two-letter (or standard) for the State or Country. **\*\* Provide the daytime business phone number of the school after the address.**

## 6. BRANCH OFFICE

- a. **NAME:** Pre-populated as “Not Applicable”
- b. **ADDRESS:** Pre-populated as “Not Applicable”

## 7. If this does apply, **HAND WRITE:** “See Attached”. This **MUST** be hand-written. It cannot be typed or pre-populated. If applicable, attach on a separate sheet of paper the following information about the Corporate Officers, Partners and/or Agents:

- a. **The FULL name to include: last name, complete first name (initials for first name will not be accepted) and middle name (if any).** \*\* If you do not have a middle name, use NMN (No Middle Name).
- b. **Physical Home Address** - Street and City names **MUST** be spelled out. The only abbreviations acceptable are the two-letter (or standard) for the State or Country. \*\* **This cannot be a PO Box.**
- c. **Social Security Number** – Must be their FULL Social Security Number
- d. **Date of Birth** – Enter dates as Month/Day/Year (MM/DD/YY).
- e. **Place of Birth - (City or County, State, Country).** City and County names **MUST** be spelled out. Only the two-letter (or standard) abbreviation for the state and Country is acceptable.

**\*\* If this does not apply, HAND WRITE: “NOT APPLICABLE”. This **MUST** be hand-written. It cannot be typed or pre-populated.**

## **SECTION II. END-USE/USER INFORMATION**

### 1. PURPOSE

- a. Pre-populated as “Computers for Learning”
- b. Pre-populated as “Not Applicable”
- c. Pre-populated checked: “The property will not be sold or otherwise disposed of for use outside of the United States to non-U.S. Citizens/Nationals in the United States.”
- d. Pre-populated as “Not Applicable”
- e. Pre-populated as “Not Applicable”
- f. Pre-populated as “Not Applicable”
- g. Pre-populated checked: “The customers are unknown at this time. If required by the contract/transfer document, I will obtain prior written approval for the resale of any of the property covered by this contract.”

**ADDITIONAL INFORMATION:** The following has been pre-populated: “Computers for Learning Program, DOD Accounting Code – H91236 – Supplementary Address:”

**\*\* You MUST provide your User ID/ Login ID after Supplementary Address.**

### **SECTION III. UNDERSTANDING AND NOTIFICATIONS**

Please read this section carefully. This section cites various laws and regulations you must comply with in the use, disposition and export of property.

### **SECTION IV. CERTIFICATION STATEMENT TO BE SIGNED BY BIDDER AT TIME OF RESPONSE TO IFB**

This section is self-explanatory. By signing and dating this form, you are certifying that all of the information you are providing is true and correct and you understand and agree to all the provisions in this End Use Certificate. This form will become part of your contract.

- 4. The person signing this DLA Form 1822 is:** Check the block that applies. **\*\* This MUST be the same person who signs the Memorandum of Agreement (MOA).**
  - a. NAME:** Ensure your name is legible and in the following format: First, Middle, Last.
  - b. SIGNATURE:** Make sure you sign this form.
  - c. DATE SIGNED:** Enter as Month/Day/Year (MM/DD/YY).