



# Contractor Data Form

CPS Energy Contractor (C) Number (MyId):

**Completed by Contractor:**

Contractor Company Name:

Note: For Contractor name, use name as shown on state issued driver's license, state issued identification card, passport or other identification document agreed to by Senior Director of Security.

First Name:  Middle Initial:  Last Name:  Suffix:

Employer or Personal Email:

Contact Telephone Number:  Driver License State:

I hereby attest that all of the above information is true and correct and consent to a background check being conducted by an authorized CPS Energy vendor in order to determine if I meet the minimum requirements to be assigned to perform services for CPS Energy.

Electronic Signature:  Date:

*Submit completed form to CPS Energy Field Representative*

**Completed by designated CPS Energy Field Representatives only:**

Agency Employee

Field Rep Employee No:  SAP Cost Object:

Field Rep Name:  Business Unit:

Work Location(s)\*

\* Include all work locations to which the contractor should be provided unescorted access.

P.O. Number:  P.O. Start Date:  P.O. End Date:

Will above contractor be provided authorized unescorted access to NERC CPS Energy Critical Cyber Assets (CCA) or NERC Facilities?

Yes  No

Select all applicable types of access: Physical  Yes  No Logical Access  Yes  No Information  Yes  No