

# Department of Commerce Personal Identity Verification (PIV) Request

## A. PIV Request & Source Document Confirmation (To be completed by Sponsor)

1. Replacement card?  No  Yes 1a. Reason for Replacement \_\_\_\_\_
2. Background investigation completed:  No  Yes Type/Date Completed \_\_\_\_\_ (If Yes, skip to Line 4 below)
3. Background investigation package complete?  Yes (Required for new cards only)

### Applicant Information

4. Type:  Employee  Contractor  Affiliate/Guest/Other

5. Name (Last, First, Middle) \_\_\_\_\_
6. Applicant ID Number (from Training Certificate) \_\_\_\_\_
7. Position or Title \_\_\_\_\_
8. Organization \_\_\_\_\_
9. Work Phone \_\_\_\_\_ 10. Email \_\_\_\_\_

### Sponsor Information

11. Sponsor ID Number \_\_\_\_\_
12. Name \_\_\_\_\_

*I agree to sponsor the above Applicant for a PIV card and certify that the information is accurate to the best of my knowledge.*

13. Sponsor Signature \_\_\_\_\_ 14. Date (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

## B. Identity-Proofing (To be completed by Sponsor, Enrollment Official, or Registrar)

15. I-9 Form Attached?  Yes
16. Copies of ID Source documents attached?  Yes
17. Did Applicant present two forms of identification, one of which was a photo ID issued by a state or the Federal government?  Yes

### Identity Proofer Information (If Applicable)

18. Identity Proofer ID Number \_\_\_\_\_
19. Name \_\_\_\_\_

*I certify that the above Applicant appeared before me and presented two ID source documents, which appeared to be genuine.*

20. ID Proofer Signature \_\_\_\_\_ 21. Date (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_  
Signed by Sponsor / Enrollment Official (circle one)

## C. Card Approval (To be completed by Registrar, after Sections A & B are completed)

**Based on NAC / NACI / FBI Fingerprint Check Results (Circle one)**

22. Date Completed (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_
23. Favorable?  Yes  No (If no, notify Sponsor for adjudication decision)
24. Comments \_\_\_\_\_

### Registrar Information

25. Register ID Number \_\_\_\_\_
26. Name \_\_\_\_\_

*I hereby  Approve  Disapprove issuance of a PIV card to the above-named Applicant.*

27. Registrar Signature \_\_\_\_\_ 28. Date (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

## D. Card Details (To be completed by Final Issuer after Section C has been completed)

29. Name on Card \_\_\_\_\_
30. Agency PIV Card Number \_\_\_\_\_
31. Card Expiration Date (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

### Issuer Information

32. Issuer ID Number \_\_\_\_\_
33. Name \_\_\_\_\_

*I acknowledge issuance of a PIV card to the Applicant identified above based on verification of the Applicant's identity and the above Registrar's issuance approval.*

34. Issuer Signature \_\_\_\_\_ 35. Date (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

## E. Applicant Acknowledgement (To be completed by Applicant, after Section D is completed)

*I, the Applicant, confirm receipt of the PIV card identified above, verify that the information is accurate to the best of my knowledge, and agree to abide by all rules and responsibilities associated with this card.*

36. Applicant Signature \_\_\_\_\_ 38. Date (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

**Upon completion, return this form to the Registrar**