

**APPLICATION FOR INSTALLATION ACCESS  
(FOR U.S. CITIZEN APPLICANTS ONLY)**

**DATA REQUIRED BY THE PRIVACY ACT OF 1974**

PRINCIPAL PURPOSE: Provide necessary information to determine if applicant meets the access control requirements. Use of Driver's License is necessary to make positive identification of the applicant.

ROUTINE USE: None.

DISCLOSURE IS VOLUNTARY: However, failure to provide information requested may delay or preclude access to the installation.

**SECTION I. Should be completed by the sponsor requesting personnel listed below inclusion to the Installation Access Roster to permit entry to the U.S. Army, Presidio of Monterey, California. Sponsor will be responsible for all actions of their guests while on the installation.**

**SECTION II is for information on U.S. Citizen applicants.**

**SECTION I. SPONSOR'S INFORMATION**

SPONSOR'S LAST NAME, FIRST NAME, MIDDLE INITIAL

SPONSOR'S WORK PHONE (Area Code and Number)

SPONSOR'S ORGANIZATION

SPONSOR'S SSN (Verification required in DEERS/DBIDS)

DATE OF BIRTH (MM/DD/YYYY)

CONTRACT EXPIRATION DATE (Contractors only)

PURPOSE OF VISIT (Please provide details in the space provided below)

Mission Requirement

Other

TYPE OF REQUEST

ACCESS ROSTER

DBIDS CARD

INITIAL REQUEST

RENEWAL

**SIGNATURE**

**DATE**

**SECTION II. INFORMATION ON U.S. CITIZEN APPLICANT(S)**

**1. LAST NAME, FIRST NAME, MIDDLE INITIAL**

FULL SSN (Verification required in CLETS)

DRIVER'S LICENSE NUMBER

ISSUING STATE

DATE OF BIRTH (MM/DD/YYYY)

**DATE OF REQUESTED ACCESS (MM/DD/YYYY)**

FROM

TO

**TIME OF REQUESTED ACCESS**

FROM

TO

DAYS REQUESTED ACCESS  MONDAY  TUESDAY  WEDNESDAY  THURSDAY  FRIDAY  SATURDAY  SUNDAY

**2. LAST NAME, FIRST NAME, MIDDLE INITIAL**

FULL SSN (Verification required in CLETS)

DRIVER'S LICENSE NUMBER

ISSUING STATE

DATE OF BIRTH (MM/DD/YYYY)

**DATE OF REQUESTED ACCESS (MM/DD/YYYY)**

FROM

TO

**TIME OF REQUESTED ACCESS**

FROM

TO

DAYS REQUESTED ACCESS  MONDAY  TUESDAY  WEDNESDAY  THURSDAY  FRIDAY  SATURDAY  SUNDAY

**3. LAST NAME, FIRST NAME, MIDDLE INITIAL**

FULL SSN (Verification required in CLETS)

DRIVER'S LICENSE NUMBER

ISSUING STATE

DATE OF BIRTH (MM/DD/YYYY)

**DATE OF REQUESTED ACCESS (MM/DD/YYYY)**

FROM

TO

**TIME OF REQUESTED ACCESS**

FROM

TO

DAYS REQUESTED ACCESS  MONDAY  TUESDAY  WEDNESDAY  THURSDAY  FRIDAY  SATURDAY  SUNDAY

**APPLICATION FOR INSTALLATION ACCESS  
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**SECTION II. INFORMATION ON U.S. CITIZEN APPLICANT(S) (Continuation page)**

<b>4. LAST NAME, FIRST NAME, MIDDLE INITIAL</b>	FULL SSN (Verification required in CLETS)
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DRIVER'S LICENSE NUMBER	ISSUING STATE	DATE OF BIRTH (MM/DD/YYYY)
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<b>DATE OF REQUESTED ACCESS (MM/DD/YYYY)</b> FROM <input type="text"/> TO <input type="text"/>	<b>TIME OF REQUESTED ACCESS</b> FROM <input type="text"/> TO <input type="text"/>
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DAYS REQUESTED ACCESS  MONDAY  TUESDAY  WEDNESDAY  THURSDAY  FRIDAY  SATURDAY  SUNDAY

<b>5. LAST NAME, FIRST NAME, MIDDLE INITIAL</b>	FULL SSN (Verification required in CLETS)
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DRIVER'S LICENSE NUMBER	ISSUING STATE	DATE OF BIRTH (MM/DD/YYYY)
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DAYS REQUESTED ACCESS  MONDAY  TUESDAY  WEDNESDAY  THURSDAY  FRIDAY  SATURDAY  SUNDAY

<b>6. LAST NAME, FIRST NAME, MIDDLE INITIAL</b>	FULL SSN (Verification required in CLETS)
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DRIVER'S LICENSE NUMBER	ISSUING STATE	DATE OF BIRTH (MM/DD/YYYY)
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DAYS REQUESTED ACCESS  MONDAY  TUESDAY  WEDNESDAY  THURSDAY  FRIDAY  SATURDAY  SUNDAY

<b>7. LAST NAME, FIRST NAME, MIDDLE INITIAL</b>	FULL SSN (Verification required in CLETS)
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DAYS REQUESTED ACCESS  MONDAY  TUESDAY  WEDNESDAY  THURSDAY  FRIDAY  SATURDAY  SUNDAY

<b>8. LAST NAME, FIRST NAME, MIDDLE INITIAL</b>	FULL SSN (Verification required in CLETS)
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DRIVER'S LICENSE NUMBER	ISSUING STATE	DATE OF BIRTH (MM/DD/YYYY)
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DAYS REQUESTED ACCESS  MONDAY  TUESDAY  WEDNESDAY  THURSDAY  FRIDAY  SATURDAY  SUNDAY

**FOR LAW ENFORCEMENT USE ONLY**

<b>DATE NCIC III CONDUCTED</b>	<b>DISQUALIFYING FACTORS</b> <input type="checkbox"/> YES <input type="checkbox"/> NO
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**FOR APPROVING AUTHORITY USE ONLY**

<input type="checkbox"/> APPROVED	PRINTED NAME	SIGNATURE	DATE
<input type="checkbox"/> DISAPPROVED			