MARINE CORPS BASE HAWAII

BASE ACCESS REQUEST FORM

FOR OFFICIAL USE ONLY – PRIVACY SENSITIVE: Any misuse or unauthorized disclosure may result in both civil and criminal penalties.

SPONSOR'S LAST NAME, FIRST, MIDDLE/DOD ID NUMBER	RANK/UNIT	SPONSOR'S PHONE NUMBER	DATE OF REQUEST

AFFILIATION OF SPONSOR	REQUESTING OFFICE (I.E. FEAD, MCCS, FACILITIES) OR PERSONAL VISITOR
USMC ACTIVE MILITARY	

SPONSOR EMAIL	SPONSOR SIGNATURE

CONTRACT NUMBER	START DATE OF VISIT	END DATE OF VISIT	ACCESS DAYS (REQUIRED)	HOURS (REQUIRED)
			MON-FRI ☐ SAT ☐ SUN ☐	

PURPOSE OF VISIT

LOCATION ☐ MCB HAWAII ☐ CAMP SMITH ☐ PU'ULOA RANGE ☐ MANANA HOUSING

REASON FOR ACCESS

☐ CONTRACTOR ☐ ONE DAY VISITOR(S) ☐ HOUSE GUEST ☐ PERSONAL SERVICES ☐ OTHER

CONTRACTOR/VENDOR/SERVICE PROVIDER/VISITOR INFORMATION

NAME (Last, First, Middle)	DATE OF BIRTH	COMPANY (IF CONTRACTOR)	EVER ISSUED DBIDS CARD OR DBIDS TEMP PASS?	If No, pre-enroll in DBIDS and enter Pre-Enrollment Code
*All VISITORS/GUESTS MUST HAVE THIER		*FOREIGN NATIONALS MUST	☐ Y ☐ N	
TWO PRIMATRY FORMS OF IDENTIFICATION		SUBMIT THEIR INFORMATION	☐ Y ☐ N	
USED WHEN PRE-ENROLLING INTO DBIDS.		PAGE OF THEIR PASSPORT WITH THIS FORM	☐ Y ☐ N	
U.S. CITIZENS MUST HAVE THE ORIGINAL		*PERMANENT RESIDENTS MUST	☐ Y ☐ N	
SOCIAL SECUIRTY CARD.		SUBMIT A FRONT AND BACK	☐ Y ☐ N	
NO COPIES/PHOTOS WILL BE ACCEPTED		COPY OF THEIR CARD WITH THIS FORM	☐ Y ☐ N	
			☐ Y ☐ N	
			☐ Y ☐ N	
			☐ Y ☐ N	
			☐ Y ☐ N	
			☐ Y ☐ N	
			☐ Y ☐ N	
			☐ Y ☐ N	
			☐ Y ☐ N	
			☐ Y ☐ N	

PASS AND REGISTRATION OFFICE USE ONLY

RECEIVED BY	DATE RECEIVED

EBW: ☐ YES ☐ NO COMPLETED BY _____ DATE _____

NCIC: ☐ YES ☐ NO COMPLETED BY _____ DATE _____

DBIDS: ☐ YES ☐ NO COMPLETED BY _____ DATE _____

SPONSORSHIP VERIFIED BY: CAC ☐ TESLIN ☐

AUTHORITY: 10 U.S.C. 5013, Secretary of the Navy; 10 U.S.C. 5041, Headquarters, Marine Corps; OPNAVINST 5530.14E, Navy Physical Security; Marine Corps Order 5530.14A, Marine Corps Physical Security Program Manual; and E.O. 9397 (SSN), as amended, SORN NM05512-2.

PURPOSE(S): To control physical access to Department of Defense (DoD), Department of the Navy (DON) or U.S. Marine Corps Installations/Units controlled information, installations, facilities, or areas over which DoD, DON, or U.S. Marine Corps has security responsibilities. **DISCLOSURE:** Providing registration information is voluntary. Failure to provide requested information may result in denial of access to benefits, privileges, and DoD installations, facilities and buildings.

Pre-Enroll in the Defense Biometric Identification System (DBIDS) at https://dbids-global.dmdc.mil/enroll#!/, at least five (5) business days and no more than (30) days prior to the the day base access is needed. Use continuation sheet if necessary. Pass and Registration phone number 257-2047/0183.

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BASE ACCESS REQUEST FORM CONTINUATION SHEET

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NAME (Last, First, Middle)	DATE OF BIRTH	COMPANY (IF CONTRACTOR)	EVER ISSUED DBIDS CARD OR DBIDS TEMP PASS?	If No, pre-enroll in DBIDS and enter Pre-Enrollment Code
			Y N	
			Y N	
			Y N	