

**MARINE CORPS BASE HAWAII VEHICLE REGISTRATION**

**PRIVACY ACT STATEMENT**

AUTHORITY: 5 U.S.C. 552a; SECNAVINST 5211.5E; and MCO 5110.1D

PRINCIPAL PURPOSE: To record data for all vehicles to be registered aboard Marine Corps Base Hawaii and issued a vehicle pass.

ROUTINE USES: The information provided on this form will be used complete the vehicle registration process upon issuance of a vehicle pass. This information is entered into the Consolidated Law Enforcement Operations Center database (CLEOC), the Marine Corps' designated repository for crime reporting and registration information as required to track vehicles registered aboard Department of the Navy installations. Information may be disclosed to local, county, state, and federal law enforcement or investigatory authorities in the act of conducting an official investigation. Information gathered from this form may be used in other related criminal and/or civil proceedings as required by law.

DISCLOSURE IS VOLUNTARY: SSN is used to positively identify the individual applying for access to a federal installation and as a conduit to check past criminal records. Disclosure is voluntary, however failure to provide the requested information may preclude the vehicle from being registered or permitted to access MCBH.

SECTIONS OR BLOCKS THAT DO NOT APPLY SHOULD BE LEFT BLANK

**SECTION I. OWNER / DRIVER INFORMATION**

LAST NAME (Include Jr./Sr./II/III/etc.)		FIRST	MIDDLE	SSN/ALIEN REG. #:	GRADE/RANK
DRIVERS LICENSE #	STATE	HT	WT	HAIR	EYES
BRANCH OF SERVICE: <input type="checkbox"/> ARMY <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> OTHER: _____			STATUS: <input type="checkbox"/> REG. (ACTIVE) <input type="checkbox"/> RESERVE <input type="checkbox"/> RETIRED <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> FAM, MEM. <input type="checkbox"/> CIVILIAN EMP. <input type="checkbox"/> CIVILIAN (NO GOV. AFF.) <input type="checkbox"/> OTHER: _____		
UNIT/ORGANIZATION (INCLUDE DEPARTMENT/COMMAND/DIVISION/UNIT, ETC.)			TELEPHONE	DATE OF BIRTH	DIC REQUIRED YES / NO
HOME ADDRESS			CITY	STATE	ZIP CODE

**SECTION II. SPONSOR (Use when registered by a person other than the Active Duty member / Sponsor may be a family member, unit, or MCCS Activity)**

NAME / UNIT / ORGANIZATION	LOCATION / DESTINATION	POC NUMBER
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**SECTION III. VEHICLE INFORMATION**

MAKE	MODEL	COLOR	YEAR	VIN			
STYLE <input type="checkbox"/> Sedan (2DR/4DR) <input type="checkbox"/> Motorcycle <input type="checkbox"/> Van <input type="checkbox"/> Pickup <input type="checkbox"/> R/V / Camper <input type="checkbox"/> Boat <input type="checkbox"/> Tractor Trailer <input type="checkbox"/> Other: _____				LICENSE PLATE #	INSURANCE COMPANY	POLICY #	EXP:
REGISTRATION EXP: _____				STATE ISSUED	SAFETY INSPECTION EXP:		

**SECTION IV. " MOVING VIOLATION HISTORY WITHIN LAST 3 YEARS (DO NOT INCLUDE PARKING VIOLATIONS) / Use back for additional space if needed)**

No.	DATE	OFFENSE DESCRIPTION	FINES / FEES / PENALTIES	MILITARY INSTALLATION OR STATE WHERE OCCURRED
1.				
2.				
3.				
4.				

As a condition of registering and operating my motor vehicle aboard Marine Corps Base Hawaii (MCBH) I agree that: Persons accepting installation driving privileges shall be deemed to have given their consent to evidential tests for alcohol or other drug content of their blood, breath and/or urine if lawfully stopped, apprehended, or ced for any offense allegedly committed while driving or in physical control of a motor vehicle on the installation while under the influence of intoxicants.

I am aware that MCO 5110.1D and MCBH traffic code provide for the removal and temporary impoundment of privately owned motor vehicles. Any privately owned motor vehicle of which I am vested with legal possession of on MCBH that is either parked illegally for unreasonable periods, interfering with military operations, creating a safety hazard, disabled by incident, left unattended in a restricted or controlled area, or abandoned:

- a. I unconditionally donate to the U.S. government all rights, title, and interests that I may posses in said vehicle.
- b. I release the U.S. government from all liability for the safeguarding of said vehicle.
- c. I expressly authorize the U.S. government to dispose of said vehicle in any matter it deems fit.
- d. I expressly release the U.S. government, its officers and agents from any liability, charges, and claims that I may have regarding the sale or other disposition of said vehicle.

I affirm that the information provided above is accurate to the best of my knowledge. I understand that I may not register, or operate my vehicle aboard MCBH while my state or base operating privileges have been suspended or revoked. I must deregister my vehicle and relinquish possession of my vehicle pass to the Pass and Registration Office located at building 1095, Kaneohe Bay or building 601, Camp Smith.

**SECTION V. OWNER / DRIVER ACKNOWLEDGMENT AND CONSENT**

LAST NAME	FIRST	MI	GRADE/RANK	SIGNATURE
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**SECTION VI. COMMAND APPROVING OFFICIAL (Personnel must be an E-8 or above, designated in writing by the Commanding Officer)**

LAST NAME	FIRST	MI	GRADE/RANK	SIGNATURE
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**SECTION VII. ADMINISTRATIVE DISPOSITION (PMO USE ONLY)**

DATE ISSUED:	EXPIRATION DATE:	PMO ISSUING OFFICIAL:
		SIGNATURE