## BASE ACCESS REQUEST

**AUTHORITY:** Title 10, United States Code 8012. **PRINCIPAL PURPOSE:** To assist security personnel in establishing a fitness determination through the identity proofing and vetting process. **ROUTINE USES:** To be utilized by personnel requesting to obtain guest installation access pass for unescorted access to Joint Base Langley/Eustis (JBLE) installations or for special one-time events. **DISCLOSURE:** Disclosure of the requested information is voluntary; however, failure to provide information may result in denial of request or the refusal by the Security Forces Squadron, Installation Access Control Section to permit access to the installation.

FOUO, This document contains information exempt from mandatory disclosure under the FOIA. Title 5 U.S.C. 552 (b) (6) applies.

This document also contains personal information that is protected by the Privacy Act of 1974 and must be safeguarded from unauthorized disclosure.

SPECIAL SECURITY REQUIREMENTS: IAW DoDM-5200.08 Volume 3, AFMAN 31-101 Volume 3, paragraph 1.1.g.(1)(b), It is the sponsoring organization's responsibility to ensure the visit is properly recorded and documented in the FVS, and the local AFOSI unit is coordinated with in advance of the official foreign visitors' arrival and prior to their departure from the installation. On the day of visit and when the **FOREIGN VISITORS** have departed the installation, email AFOSI, at

LANGLEYAFOSIREGION2.Det201CI.Counterintelligence@us.af.mil indicating time of arrival and departure from the installation. All must be escorted while on base.

IAW JBLE IDP all foreign request must be submitted to 633 SFS/VCC or 733 SFS/VCC seven (7) days in advance of the visit. The Sponsor signing below assumes responsibility while the individual is on base and must be on an Appointment Letter on file at the Visitor control Center. All individuals will be subjected to a Criminal History Background check. All EAL Requests will be submitted <u>14 days in advance</u> of the event.

**Reminder:** Badges must be returned to the Visitor Control Center upon termination of the contract or employment. If an extension is required, another form shall be completed. The individual(s) listed below has been thoroughly briefed on entry procedures and conduct while on Joint Base Langley-Eustis. Any violation or disruption of order will be reported to the sponsor by Security Forces member. Previously issued badges must be returned prior to re-issuance of a new badge. Lost badges require a Letter of Lost Controlled Item prior to a replacement being issued.

The following information has been provided to aid in the completion of the Access Request. Section I:

Sponsor Information.

Block 1. Title The sponsors title (ie; Mr., Ms., Mrs., or associated rank of Military/GS employee). Block 2.

Last Name, First Name MI (Full name of sponsor, use format assigned).

Block 3. Duty Phone (Office number you can be reached at during business hours).

Block 4. Cell/Home Phone (Phone number you may be reached at during requested access times for your guests). Block 5. DoD

ID Number (Assigned number on your DoD ID Card-This is required to fully identify you in DBIDS). Block 6.

Organization/Home Address (If you are sponsoring for a government purpose use your organization.

If it is for personal reasons use your home address).

Block 7. Email Address (email submissions will be sent encrypted utilizing a .mil email address).

Section II: Access Details.

Block 8. Category for Access (Check the category of your guest).

Block 9 Location (Check which location(s) in the JBLE area you are requesting your guests access to - Must be a valid

need to enter these locations. Contractor/Vendors must provide contract number stating access locations are required).

Block 10. Time Frame

From Date (Start date of visit/contract, etc...)

To Date (End date of visit/contract, etc...)

From Time (Start time of visit or if continual access, start time each day)

To Time (End time of visit or if continual access, end time each day)

Days of Week (Days of week entry is required - If visiting select day(s) visit will take place, if continual access is required -

actual days of work required to be present)

Block 11. Reason for Access. Provide specific reason for access (ie; Meeting, Tow Truck, Pop-A-Lock, Taxi,

Wedding, Family visit, etc...).

Block 12. Identify the Visiting Organization, Name of Event or if Contractor: Company Name (Prime and Sub Contractor), Contract Number, and Contract Period.

Block 13a, b, c: Sponsor completes each block. Must be legible when completed manually.

Section III: Visitor Center Use Only.

Section IV: Foreign Disclosure Office (FDO) and AFOSI use only. Section V:

Guest Information.

FOREIGN VISITORS must be submitted to 633 SFS/VCC (633SFS.S5P.VISITORCONTROLCENTER@us.af.mil) or 733 SFS/VCC (733MSG.S5T.VCC@us.af.mil) at least seven (7) days in advance for processing through AFOSI . Block 16.

Fill in the blocks for all visitors 16 years of age or older.

BASE ACCESS REQUEST												
I. SPONSOR INFORMATION												
1. TITLE	2. NAME (Last, First, MI)	3. DUTY PHONE	2	I. ALTERI	NATE PHONE NUMB	ER	5. DOD ID					
6. ORGAN	IIZATION/HOME ADDRESS	7. EMAIL ADDRESS										
II. ACCES	SS DETAILS											
	ORY OF ACCESS Contractor Visitor Foreign National ( <u>must be always escorted</u> ) Other EAL (Specify)	9. LOCATION          Langley AFB         Fort Eustis         Both         g requested including compared	J J	Af	):		Monday to Friday Weekends Only Sunday to Saturday					
	RACTOR/SUBCONTRACTOR COMPANY OR SPECIAL I SOR'S NAME, RANK, TITLE AND OFFICE SYMBOL	EVENT NAME	]	3b. SIGNA	ATURE		13c. DATE					
III VISIT	OD CENTED LISE ONLY											
III. VISITOR CENTER USE ONLY 14a. DATE RECEIVED		14c. SEARCH PARAMETERS		14d. APPROVAL AND POSTING Approved		ĩ	14e. EAL Posted at: VCC Main Gate Other					
14b. DATI	E VETTED	VCIN AFJIS		Den	ied		(specify)					
15a. VERI	FIED BY NAME, RANK, TITLE AND OFFICE SYMBOL		1	5b. SIGN	ATURE		15c. DATE					
	n Disclosure Office (FDO) and AFOSI use only											
16a. CASE	NAME	16b. VETTED DATE	1	6c. APPR	OVAL		Denied					
17a. VERI	FIED BY NAME, RANK, TITLE AND OFFICE SYMBOL		17b. SIGNATU	RE		17c. DA	ATE					

Nam	e (Last, First MI)	DOB	ID Туре	Country	STATE	ID Number	VCC Use Only
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