

APPLICATION FOR INSTALLATION ACCESS

(AE Reg 190-16)

PRIVACY ACT STATEMENT (For U.S. Citizens)

Authority: 5 USC 301, Departmental Regulations; 10 USC 113, Secretary of Defense, Note at Public Law (P.L.) 106-65; 10 USC 136, Under Secretary of Defense for Personnel and Readiness; 18 USC 1029, Fraud and Related Activity in Connection With Access Devices; 18 USC 1030, Fraud and Related Activity in Connection With Computers; 40 USC, Information Technology Management; 50 USC, Chapter 23, Internal Security; P.L. 103-398, Government Information Security Act; P.L. 100-235, Computer Security Act of 1987; P.L. 99-474, Computer Fraud and Abuse Act of 1986; Executive Order 9397, Numbering System for Federal Accounts Relating to Individual Persons.

Principal purpose(s): To identify personnel authorized routine or recurring access to installations under U.S. control.

Routine use(s): Those permitted under 5 USC 522a(b) of the Privacy Act and as specifically allowed outside the DOD pursuant to 5 USC 522a(b)(3) of the Privacy Act.

Disclosure: Voluntary; however, failure to provide any item of information will result in denial of entry onto U.S.-controlled installations.

Please refer to the instructions on page 3 to ensure that the form is correctly filled in.

1. To		2. From		3. Date (YYYYMMDD)	
4. Name (Last, first, MI)		5. Applicant's home address		6. Applicant's work address (Company, organization, unit) and telephone no.	
7. Person category		8. Country of citizenship		9. Personal ID number	
10. Supporting document expiration date (Passport/ID card)		11. Residence permit required? <input type="checkbox"/> Yes <input type="checkbox"/> No		12. Work permit required? <input type="checkbox"/> Yes <input type="checkbox"/> No	
13. Access requested <input type="checkbox"/> Installation pass <input type="checkbox"/> Temporary installation pass <input type="checkbox"/> Common Access Card		14. Date of birth (YYYYMMDD)	15. Weight (Pounds)	16. Height (Inches)	17. Eye Color
					18. Hair Color
19. Limitations/time/day access is required				20. Pass expiration date (YYYYMMDD)	
				IACO registrar must validate	
21. FPCON restriction					
Justification					
22. Installations for which access is required (Provide justification.)					
Justification					
23. Visitor-sponsor/sign-in privileges					
<input type="checkbox"/> No <input type="checkbox"/> Yes (Provide justification.)					
Justification					

24. Privately owned vehicle (POV) registration information (Additional vehicles may be added on a separate sheet of paper.)

a. License number	b. Country	c. Make	d. Model	e. Year	f. Body type	g. Color

25. Required attachments (Check applicable boxes.)

All installation-pass applications must include supporting documents. Requirements may be different depending on the person category selected.

- | | |
|--|--|
| <input type="checkbox"/> Residence Permit | <input type="checkbox"/> Germany - Fax-Back (U.S. contractor) |
| <input type="checkbox"/> Work Permit | <input type="checkbox"/> Germany - AE Form 604-1A initiation |
| <input type="checkbox"/> Good Conduct Certificate (GCC) (no entries) | <input type="checkbox"/> Local National Screening Program (LNSP) results (no entries) |
| <input type="checkbox"/> GCC (entries adjudicated) | <input type="checkbox"/> Local National Screening Program (LNSP) results (entries adjudicated) |
| <input type="checkbox"/> Military Police (MP) check | |

26. Verification by sponsoring official (Must check both boxes.)

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|--|
| <input type="checkbox"/> I have reviewed the results of all background checks required by AE Regulation 190-16 and verify that there is no derogatory information that would preclude the issuing of an installation pass. |
| <input type="checkbox"/> I verify that the applicant has been informed of the purpose and proper use of the installation pass. I have reviewed AE Regulation 190-16 and believe this packet is administratively correct and fully and accurately indicates the applicant's access requirements. However, if there is a problem or you need further information, please contact me. |

a. Organization, telephone number, and e-mail address**b. Name and title****c. Date** (YYYYMMDD)**d. Signature** (Digital or handwritten)**27. To be completed by the registrar****a. Registrar's name** (Printed)**b. IACO****c. Date issued** (YYYYMMDD)**d. Registrar's signature****28. Additional comments**

Instructions for completing AE Form 190-16A

Block 1. To

Enter the name of the servicing installation access control office.

Block 2. From

Enter the name of the sponsoring official's organization.

Block 5. Applicant's home address

Enter the mailing address of the applicant.

Block 6. Applicant's work address (Company, organization, unit) and telephone no.

Enter the address and telephone number of the unit of assignment. This address will depend on the applicant's person category. For example, for local national employees, enter the hiring organization's address. For contractors and delivery personnel, enter the address of their company.

Block 7. Person category

- | | |
|--|---|
| » Contractor (EU/NATO)
Contractor who is a resident of the European Union or a NATO-member country | » HN Government
Host-nation Government official |
| » Contractor (U.S.)
Contractor who is a U.S. citizen working for a U.S. company based in the United States | » Non-U.S. Military Member
Local National Employee |
| » Delivery Personnel
Personnel making recurring deliveries or providing similar service not associated with a Government contract | » Member PO
Member of a private organization |
| » DOS/American Embassy
Department of State and American Embassy personnel | » NATO Member
Official Guest |
| » Foreign Student
Foreign student at the Marshall Center | » Personal-Service Employee
Vendor |
| » Gate Guard | Vendor providing merchandise or services not associated with a Government contract |
| | » Family Member (in Europe)
Immediate Family member living in Europe |
| | » Family Member (not in Europe)
Friend or Family member not included in the category above |
| | » Other |

Block 9. Personal ID number

Enter the personal identification (ID) number or the passport number from the supporting document used. The applicant must have one of the following supporting documents:

- Passport
- Personal ID card issued by the country of citizenship (for example, German *Personalausweis*, Belgian *Identiteitskaart* or *carte d'identité*, Italian *carta d'identità*)
- Military ID card issued by one of the NATO Sending States (Belgium, Canada, France, Netherlands, United Kingdom)

Block 10. Supporting documentation expiration date

Enter the expiration date of the supporting document (for example, expiration date of passport or German *Personalausweis*).

Block 11. Residence permit required?

If required, check the appropriate box to indicate whether a copy of the residence permit is attached. See AE Regulation 190-16 for guidance.

Block 12. Work permit required?

If required, check the appropriate box to indicate whether a copy of the work permit is attached. See AE Regulation 190-16 for guidance.

Block 13. Access requested

Check the appropriate box. If an installation pass is requested, a temporary installation pass may be issued pending completion of a required background check. A temporary installation pass is valid for up to 90 days. The restrictions associated with each pass are different for each individual's access requirements.

Block 19. Limitations/time/day access is required

Enter "24/7" if access is required all the time; otherwise state the specific days of the week and times. Installation access control offices (IACOs) may require justification for liberal access (such as 24/7), so sponsoring organizations should be prepared to justify this entry.

Block 20. Pass expiration date

This field will be validated by the IACO. Justification for this date must be provided. A temporary installation pass is valid for up to 90 days. The expiration date of an installation pass depends on the limitations of the person category (block 7) and the expiration date of the supporting document (for example, passport) that was used to obtain the installation pass. The expiration date will be whichever date is earlier.

Block 21. FPCON restriction

Enter the force-protection condition (FPCON) restriction.

- Delta (provide justification, including first or emergency responder duties)
- Charlie (provide justification, including a list of essential duties)
- Bravo

Block 22. Installations for which access is required

The sponsor must provide specific justification for the applicant's access requirements. Access is limited to the minimum number of installations required for the applicant to perform his or her duties (for example, Clay Kaserne). If greater access is required (for example, access to more than one USAG), additional documentation must be provided, such as a contract statement of work that lists the installations by name where the work is to be performed.

Block 23. Visitor-sponsor/sign-in privileges

Check the appropriate box to indicate whether visitor-sponsor and sign-in privileges are required. If these privileges are requested, the sponsoring official must include a justification in block 23. The justification must explain why the applicant requires these privileges in the performance of duties. *NATO Member* and *Department of State and American Embassy* person categories default to visitor-sponsor and sign-in privileges authorized; no justification is required.

Block 24. Privately owned vehicle (POV) registration information

- a. State the license plate number exactly as it appears on the plate.
- b. State the country for which the license plate was issued.
- c. State the make of the vehicle (for example, Opel, Saab, BMW).
- d. State the model of the vehicle (for example, 325i, Astra, 190E, S60).
- e. State the year the vehicle was manufactured (YYYY).
- f. State the body type of the vehicle (for example, 2-door sedan, bus).
- g. State the color of the vehicle.

Block 25. Required attachments

Check all applicable boxes and provide photocopies of supporting documents.

Block 26. Verification by sponsoring official

State the name, title, organization, telephone number, and e-mail address of the sponsoring official. The IACO must have DD Form 577 on file to verify the sponsoring official's authority.

Block 28. Additional comments

Provide any additional supporting information or justification.