

FOR GATE PERSONNEL ONLY: PASS ISSUED BY: \_\_\_\_\_  
RANK & NAME

DATE: \_\_\_\_\_  
MM-DD-YYYY

NCIC III Criminal History and Driver's License Background Check completed using TLETS? Y / N

## INFORMATION SHEET FOR DBIDS PASS

PLEASE PRINT LEGIBLY

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_ M / F  
(FIRST FULL MIDDLE NAME LAST) (MM-DD-YYYY) (CIRCLE ONE)

EYE COLOR: \_\_\_\_\_ HAIR COLOR: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ WEIGHT: \_\_\_\_\_

DL or ID NUMBER: \_\_\_\_\_ SSN: \_\_\_\_\_  
(Circle one) (STATE AND NUMBER)

ADDRESS: \_\_\_\_\_  
(NUMBER, STREET NAME CITY, STATE ZIP CODE)

PHONE NUMBER: ( ) \_\_\_\_\_ CITIZENSHIP: \_\_\_\_\_  
( ) HOME ( ) CELL (AREA CODE AND NUMBER) (USA, MEXICO, CUBAN, KOREAN, etc., ALL FOREIGN  
(CHECK ONE) VISITORS REQUIRE AN APPROVED FOREIGN VISITOR REQUEST FORM SIGNED BY 17SFS/CC)

US PASSPORT NUMBER: \_\_\_\_\_

PERMANENT RESIDENT or WORK AUTHORIZATION ID CARD NUMBER: \_\_\_\_\_  
(USICS (A) NUMBER)

NAME OF SPONSOR: \_\_\_\_\_  
(RANK LAST FIRST M.I.)

PHONE NUMBER: ( ) \_\_\_\_\_ UNIT: \_\_\_\_\_  
(AREA CODE AND NUMBER) (344<sup>TH</sup>, 312<sup>TH</sup>, 315<sup>TH</sup>, 316<sup>TH</sup>, MCD)

DATES: \_\_\_\_\_ to \_\_\_\_\_ TIMES: \_\_\_\_\_ to \_\_\_\_\_  
(MAXIMUM IS 3 DAYS) (IF 24 HOURS IS NEEDED, PLEASE STATE REASON BELOW):

LOCATION THEY WILL BE GOING TO: \_\_\_\_\_  
(BLDG # AND NAME OR VARIOUS LOCATIONS)

YEAR/MAKE/MODEL/COLOR OF VISITOR'S VEHICLE: \_\_\_\_\_  
(Example: 2021 CHEVROLET, CRUZE, BLUE, 4DR)

VEHICLE IDENTIFICATION NUMBER (VIN): \_\_\_\_\_

STATE OF ISSUE / LICENSE PLATE # AND EXPIRATION: \_\_\_\_\_  
(Example: TX ABC123, DEC 2021)

INSURANCE COMPANY NAME: \_\_\_\_\_  
(Example: ALLSTATE, PROGRESSIVE, FARMERS, etc...)

INSURANCE POLICY NUMBER AND EXPIRATION DATE: \_\_\_\_\_

REGISTERED OWNER OF THE VEHICLE: \_\_\_\_\_  
(Name Address city, state, zip code)

REGISTERED OWNER'S PHONE NUMBER: \_\_\_\_\_  
(AREA CODE AND NUMBER)

\*\*\*ALL AREAS MUST BE FILLED OUT UNLESS YOU DON'T HAVE A PASSPORT NUMBER OR PERMANENT RESIDENT NUMBER OR WORK AUTHORIZATION NUMBER\*\*\*

\*\*\*ALL COMPLETED SHEETS MUST BE TURNED-IN TO BDOC AT THE END OF SHIFT.

\*\*\*ALL passes WILL BE issued through the work station NO EXCEPTIONS!!\*\*\*

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TYPE OF PASS ISSUED: \_\_\_\_\_ DBIDS or \_\_\_\_\_ HANDWRITTEN