



DEPARTMENT OF THE AIR FORCE  
HEADQUARTERS 36TH WING (PACAF)  
ANDERSEN AIR FORCE BASE GUAM

MEMORANDUM FOR 36 SFS/S5B

FROM: (Rank/Name) \_\_\_\_\_  
(Unit/Squadron) \_\_\_\_\_

SUBJECT: **ANDERSEN AFB SPECIAL EVENT PASS REQUEST**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>AUTHORITY: 10 USC 8013, 44 USC 3101, and EO 9397</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                               |
| <b>PRINCIPAL PURPOSE: To record personal information to determine access to the installation</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                               |
| <b>ROUTINE USES: None</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                               |
| <b>DISCLOSURE IS VOLUNTARY: Failure to disclose the requested information may result in denial of entry onto the installation</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                               |
| EVENT: (i.e. birthday party)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                               |
| LOCATION or ADDRESS:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                               |
| DATE(S):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>START/</b> <b>END/</b>                                                                                                                                                     |
| START TIME: (i.e. 0500 or 24/7)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                               |
| END TIME (i.e. 1900 or 24/7)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                               |
| POINT OF CONTACT (POC):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | NAME: RANK:                                                                                                                                                                   |
| SQ/UNIT:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> Active Duty <input type="checkbox"/> Guard/Reserve <input type="checkbox"/> Retired <input type="checkbox"/> Civilian <input type="checkbox"/> Other |
| CONTACT INFO:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | PHONE: EMAIL:                                                                                                                                                                 |
| In order to ensure your guests are authorized entry to the base, this request must be processed at 36 SFS Pass & ID/Bldg 2403 <b>(5-7) DUTY DAYS PRIOR TO THE EVENT</b> . Pass & ID may be contacted Mon-Fri 0800-1600, 366-5650 or <a href="mailto:36sfs.vcc@us.af.mil">36sfs.vcc@us.af.mil</a> to check the status of your request. All guests 16 years of age and older must be listed on this request with complete DOB, in order to be authorized base access. Guest above the age of 16 are required to provide full SSN. A background check will be completed on all of your guests, prior to base access. <b><u>NO EXCEPTIONS.</u></b> Requester is responsible for all guests while on AAFB property. Guest will proceed directly through the installation main gate to the location of the event. Failure to comply with the may result in an <b><u>Escort Violation</u></b> . Approval of unescorted entry does not constitute permission for guest to tour the installation. Violators will be processed appropriately. |                                                                                                                                                                               |
| By signing below, I have read the above and agree to the information and terms prescribed by Andersen AFB.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                               |
| DATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Signature Required:                                                                                                                                                           |
| Advise your guests and their passengers of the following required criteria to enter Andersen Air Force Base. To avoid any unnecessary delays, ensure they arrive at the gate in ample time to verify their documents (Drivers License, Vehicle Registration and Vehicle Insurance). Guest with <u>unfavorable</u> backgrounds may not be allowed access to Andersen AFB.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                               |
| <b>Unit Commander/First Sergeant or designee:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                               |
| PRINT NAME:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                               |
| DATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Signature Required:                                                                                                                                                           |
| This document contains FOR OFFICIAL USE ONLY (FOUO) information which must be protected under the Privacy Act and AFI 33-332                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                               |

PRIVACY ACT STATEMENT: AUTHORITY: Title 5 USC Section 301, Departmental Regulation

Principle Purpose: To record personal information and determine access to the installation

ROUTINE PURPOSE: To request and record the issuance of a Visitor Pass when the use of another form is not authorized or specified. Failure to provide any information requested may result in non-issuance of the Visitor Pass. Disclosure of information is voluntary acceptance of these terms constitutes approval for a background check to be conducted as part of the request approval process. The information is necessary for validation of identity and determination of entry eligibility on to Andersen Air Force Base. Failure to provide this information may result in non-issuance determination by the issuing authority.

| RN | REQUEST<br>TYPE<br>QH/QR | III<br>REQUESTER | DATE OF<br>REQUEST | SUBJECT<br><br>LAST, FIRST MI | FBI | DOB<br><br>YYYY-MM-DD | SSN<br><br>123-45-6789 | PASSPORT<br>NUMBER<br><br>IF SSN NOT<br>APPLICABLE | PUR<br>COD<br>E C/<br>J/ F/<br>H/ D | SPECIFIC REASON<br>FOR III REQUEST<br>LIST ASSOCIATED<br>INVESTIGATION<br>AND INDICATE IF<br>QUERY MADE AT<br>TIME OF ARREST |
|----|--------------------------|------------------|--------------------|-------------------------------|-----|-----------------------|------------------------|----------------------------------------------------|-------------------------------------|------------------------------------------------------------------------------------------------------------------------------|
| 1  | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 2  | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 3  | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 4  | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 5  | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 6  | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 7  | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 8  | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 9  | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 10 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 11 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 12 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 13 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 14 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 15 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 16 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 17 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 18 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 19 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 20 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 21 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 22 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 23 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 24 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 25 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 26 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 27 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 28 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 29 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |
| 30 | QH                       |                  |                    |                               |     |                       |                        |                                                    | C                                   | MG-Base Access                                                                                                               |