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Phone:

DEPARTMENT OF THE AIR FORCE HEADQUARTERS, 36TH WING (PACAF) UNIT 14003, APO AP 96543-4003

	Date Modified: 30 Apr 2024	
	Date:	
MEMORANDUM FOR 36 SFS/S5B		
FROM: (RANK/NAME)(UNIT/Squadron)		
SUBJECT: Special Purpose Pass		
1. I am requesting a DBIDS or AF Form 75, Base Pass, for:		

Full Name(s):	SSAN:	DOB:	CHECK OR CIRCLE
			□UNESCORTED / □ ESCORTED
			□UNESCORTED / □ ESCORTED
			□UNESCORTED / □ ESCORTED
			□UNESCORTED / □ ESCORTED
			□UNESCORTED / □ ESCORTED
			□UNESCORTED / □ ESCORTED
			□UNESCORTED / □ ESCORTED
REQUESTOR'S ADDR	ESS:		

2. Justification for this special purpose pass is for the following reasons:				
3. Inclusive Dates: Fro	m:	To:		
via the DBIDS pass or t directives are followed visitor is briefed that de	the AF Form 75. and accept full re viations from into om the installatio	As the sponsor, I assume sole responsibility to ensure all esponsibility for the actions of my visitor(s). I will ensure the rended route and/or purpose will result in immediate termination of the All visitors will be proofed and vetted by the 36 SFS/S5B5650/51/52/53		
Requestor:		rst Shirt/Commander		

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

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

Sign:_

Phone:_

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.