

374 AW (YOKOTA AB) ACCESS REQUEST

AUTHORITY: Title 10, U.S.C. 9013, Secretary of the Air Force; DoDM 5200.08V3_AFMAN 31-101V3. **PRINCIPAL PURPOSE:** To assist security personnel in registering access for personnel onto the installation. **ROUTINE USES:** Utilized by personnel requesting to obtain an installation escorted and unescorted visitor pass for access to Yokota Air Base or Tama Hills Recreation Area. **DISCLOSURE:** Disclosure of the requested information is voluntary; however, failure to provide information may result in the refusal and possible denial by the 374th Security Forces Squadron personnel to permit access to the installation.

CONTROLLED UNCLASSIFIED INFORMATION (CUI): When filled in, the document contains info that falls under CUI Program, DoDI 5200.48. The requestor is responsible to ensure all CUI marking and protection requirements are followed.

SPECIAL SECURITY REQUIREMENTS (EMAIL Completed Form/Attachments to: 374SFS.S5PR.PassRequests@us.af.mil):

ESCORTED Requests must be submitted THREE (3) DUTY DAYS before date of entry.

UNESCORTED Requests must be submitted THIRTY (30) CALENDAR DAYS before date of entry.

This is the official 374 AW Base Access Request form for any ESCORTED or UNESCORTED. The following are the form instructions.

NOTE: For Official UNESCORTED access requiring a DBIDS card. Each person must complete a separate Passport Application Form for initial entry and submit with this form (Retrieve Form from Attachments Area).

SECTION I: SPONSOR INFORMATION

Block 1. Title of Sponsor (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. DoD ID Number (Assigned number on your DoD ID Card, if issued - This is required to identify you as an authorized sponsor in DBIDS).

Block 5. Organization/Home Address (For Official, use your organization address. For Personal, use your home address).

Block 6. Email Address (email submissions will be sent encrypted utilizing a .mil email address).

SECTION II: ACCESS DETAILS

Block 7. Category for Access: Check appropriate categories. Unofficial visits are for personal reasons and Official visits are for business related matters.

Additionally, select if the access requires to be Escorted or Unescorted. **NOTE: Unescorted requests must explain reason for visit.**

Block 8. Location (Check location(s) guests need access to).

Block 9. From Date (Start date of visit/contract, etc...) **To Date** (End date of visit/contract, etc...)

From Time (Start time of visit for each day) **To Time** (End time of visit for each day)

Days of Week (Days of week entry required - If visiting select only the actual day(s) the visit will take place.

Block 10. Reason for Access. Provide specific reason/purpose for access (ie; Meeting, Tow Truck, Pop-A-Lock, Taxi, Wedding, Family visit, etc.)

Block 11. Visiting Contract Company or Special Event Name: Company/Event Name with POC Phone #, Contract/Event # and Contract/Event Period.

Block 12. Escort Official Name(s): If the sponsor will not be the escort official or identifying more than one escort, provide names here.

Block 13. Unofficial guests staying with sponsor longer than 30 days: Sponsor must get 374 CES/Family Housing Approval.

Block 14. Sponsor Signature: Sponsor must complete each block. Must be legible when completed manually.

SECTION III: SECURITY FORCES AND AFOSI USE ONLY - ESCORTED requests; fitness determination not required, only barment roster check.

SECTION IV: GUEST INFORMATION - May use this form or excel (attached). when using this form, select "Add Page" for extra visitors.

Fill in the blocks [alphabetical order] for all visitors 15 years of age or older.

Last Name, First Name MI: Full name of visitor in English.

DOB and Residence Card or SSAN (US Only): Date of Birth (Use format assigned); Residence Card (Add number, if issued); SSAN (US Unescorted Access)

Home Address: (Permanent Address is address registered in home country)(Present Address is where currently living or residing in Japan)

PoB and Citizenship: (Place of Birth and Country of Citizenship)

Sex: Gender of the Visitor (M=Male / F=Female / O=Other)

ID Type: Visitors must be in possession of a valid form of photo ID (AFMAN 31-101V3 and USFJI 31-206 Acceptable Forms)

NOTE: Must send a color digital (electronic) photocopy of one of these valid IDs with this request to process virtually.

1 = Japanese Identification Card with Photo (i.e. My Number Card)

2 = Japanese Driver's License

3 = Japanese Government Identification Card (i.e. Japan NPA, Japanese Military)

4 = Passport (Any person not a Japanese national must have a passport with visa and/or proper immigration documentation)

ID Number: Enter ID number for the associated ID selected.

Country of Issue: (Country where identification was issued)

NOTE: If guest is being ESCORTED, the ID Type/Number and Country of Issue do not need to be filled

I understand I am responsible for my guest's actions on the installation. The guest has been briefed the pass will be utilized only for the requested purpose. I will comply with the procedures established in YABI 31-101, concerning Installation Entry Control procedures for Non-Status of Forces Personnel. Furthermore, I understand if any of my guests are to stay with me on base, I must adhere to 374 CES/Family Housing Guidance, AWPAM 32-6001.

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I. SPONSOR INFORMATION (スポンサー情報)

<u>1. TITLE</u>	<u>2. LAST NAME, FIRST NAME, MI (姓、名、ミッド・ネーム)</u>	<u>3. DUTY PHONE (勤務先の電話)</u>	<u>4. DoD ID NUMBER (DOD 識別番号)</u>
<u>5. ORGANIZATION/HOME ADDRESS (勤務先住所)</u>		<u>6. EMAIL ADDRESS (Eメール)</u>	

II. ACCESS DETAILS (アクセスの詳細)

<u>7. CATEGORY OF ACCESS (カテゴリー)</u> <u>UNOFFICIAL VISIT</u> ESCORTED UNESCORTED (Must have valid reason) <u>OFFICIAL VISIT</u> ESCORTED UNESCORTED (Must have valid reason)	<u>8. LOCATION (場所)</u> YOKOTA AB TAMA HILLS REC OTHER	<u>9. TIME FRAME (時間/日付)</u> FROM DATE: _____ TO DATE: _____ FROM TIME: _____ TO TIME: _____	SUNDAY MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY SATURDAY
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<u>10. REASON FOR ACCESS (Be Specific) (理由)</u>

<u>11. CONTRACTED COMPANY (For Contractor, Provide POC Phone #) OR SPECIAL EVENT NAME (会社名またはイベント名)</u>

<u>12. ESCORT OFFICIAL NAME(S), IF NOT THE SPONSOR (エスコート官氏名、もしスポンサー以外がエスコートする場合)</u>

<u>13. UNOFFICIAL GUESTS STAYING WITH SPONSOR 30 DAYS OR MORE:</u>	<u>SIGNATURE</u>
DATE OF SIGNATURE (署名日)	374 CES/FAMILY HOUSING APPROVER
DATE OF SIGNATURE (署名日)	SPONSOR NAME/RANK & OFFICE SYMBOL (スポンサー情報)
	<u>SIGNATURE</u>

III. SECURITY FORCES AND AFOSI USE ONLY (空白のままにする)

<u>TRACKING NUMBER</u>	<u>POSTED DATE</u>	AFOSI Representative	
		AFOSI CHECK	
<u>ECP POSTED LOCATION (For EAL Use)</u>		Pass and ID Representative	
		SFS CHECK	
<u>DATE OF SIGNATURE</u>	<u>BASE APPROVER NAME, RANK, AND OFFICE SYMBOL</u>	<u>SIGNATURE</u>	

