(USFK REG 190-7) SEE PRIVACY ACT STATEMENT ON PAGE 2 SECTION I- TO BE FILLED OUT BY SPONSOR AND APPLICANT (TYPE OR PRINT) 1. NAME (LAST, FIRST, MIDDLE) 2. SEX FEMALE MALE 3. a KID/SSN OR PASSPORT 3.b DoD ID Number							
SECTION I- TO BE FILLED OUT BY SPONSOR AND APPLICANT (TYPE OR PRINT) 1. NAME (LAST, FIRST, MIDDLE) 2. SEX FEMALE 3. a KID/SSN OR PASSPORT 3.b DoD ID Number							
1. NAME (LAST, FIRST, MIDDLE) 2. SEX FEMALE 3. a KID/SSN OR PASSPORT 3.b DoD ID Number							
	3.6 Dod id Number						
4.DOB (YYYYMMDD) 5. HEIGHT 6. WEIGHT 7. HAIR 8. EYES 9. GLASSES 10. POB (CITY/COUNT YES NO	RY)						
11. ADDRESS & PHONE NO.							
11.a. CURRENT ADDRESS & PHONE NO. (ST NO., CITY & PROVINCE) 11.b. PERMANENT ADDRESS & PHONE NO. (ST NO., CITY & PROVINCE) . .							
12. ACCESS REQUIRMENTS (If USFK or EUSA-wide; Special processing required)							
12.a. ACCESS AREA 12.b. FPCON (A,B,C,D) 12.c. ESCORT PRIVILEGES 12.d. HOURS 12.e. DAY	/S						
YES NO PERS Vehicle							
12.f. PASS TYPE 12.g. STATUS EMPLOYEE ROK MILITARY SPONSORED GUEST SHORT TERM VISITOR INITIAL RENEWAL	UPDATE						
CONTRACTOR ALLIED NATION DRIVER (RED) PERSONAL EMPLOYEE							
VOLUNTEER DCP (RED) (Non-dependant) ROK GOVERNMENT OFFICIALS YES NO							
13. SPONSOR INFORMATION							
13.a. SPONSOR (FULL NAME/RANK or GRADE) 13.b. SPONSOR FULL SSN 13.c. SPONSOR ORG & PHONE NO.							
SPONSOR STATEMENT OF UNDERSTANDING							
I fully understand my responsibilities as a sponsor for the control of the person identified at the top of this application. All information submand correct to the best of my knowledge. I further understand that it is my responsibility to ensure that I notify the Installation Pass & ID C change in my status as a sponsor or any knowledge of misuse of the pass to be issued. It is my responsibility to ensure that the pass is returned. Installation Pass & ID Office if it is not renewed, upon termination of employment or services being provided; or for short term visitors service employees, prior to my DEROS. Failure to comply with these requirements may result in adverse administrative or legal action again	Office of any urned to the or personal						
15. SPONSOR SIGNATURE DATE							

	SECTION II - TO BE FILLED O	OUT BY	DOD SPONS	SOR, CPOC	OR USACCK		
NAME (LAST, FIRST, MIDDLE)		KID/SSN OR PASSPORT					
16. GRADE/RANK	17. JOB TITLE				18. DATE OF EMPLOYMENT		
19. UNIT/AGENCY/COMPANY ADDRESS/PHONE NO.		20. CONTRACTING OFFICER / PHONE NO.					
			21. CON	TRACT NO			
			22. CONTRACT PERIOD (YYYYMMDD-YYYYMMDD)				
	SECTION III -	- REQU	ESTING AUT	HORITY			
I HAVE REVIEWED THIS APPLICATIO DOCUMENTATION AND I ENSURE IT USFK REG 190-7. Recommend Approval			SIGNATUR	E, TYPED M	NAME, GRADE, DUTY TITLE		
	SECTION IV – TO BE	FILLED	OUT BY PA	SS & ID OF	FICE		
23. BACKGROUND CHECK WITHIN LA 23.a. Local Law Enforcemen 23.b. KNP	Requested (Comple	NO eted		DGATORY INFORMATION YES ate Provided Approval Authority	NO	
23.c. US Embassy (if applica 25. IS APPLICANT A DESIGNATED CO		26	3. IS THIS PA	L SS APPLIC	ATION IAW USFK REG 190-7?		
YES NO			YES NO				
27. DATE PASS ISSUED	. DATE PASS ISSUED 28. PASS EXPIRATION DATE						
I HAVE REVIEWED THIS APPLICATI	ON TO ENSURE INFORMATION ENCLOSED A				JIRED FOR AN APPROVAL DETERMIN	VATION ARE	
29. SIGNATURE OF PASS & ID SECTI	ON CHIEF OR NCOIC			DAT	Έ		
	SECTION V	– APPR	ROVAL AUTH	IORITY			
I HAVE REVIEWED THIS APPLICATIO DOCUMENTATION AND I ENSURE IT REG 190-7. Approved		USFK	SIGNATUR	E, TYPED №	VAME, GRADE, DUTY TITLE		
	PRIVA		STATEMEN	т			
1. AUTHORITY: Title 10, USC, 3012(g).						
 2. PRINCIPAL PURPOSE(S): Use of 3. ROUTINE USES: An individual's S may be used for the collection of de individual's existe billty for second to US 	Social Security Number or Kore erogatory information on file v	ean Ider	ntification nur	mber, toget	her with name and other personnel ic	dentifying data,	
individual's suitability for access to US 4. MANDATORY OR VOLUNTARY D Disclosure of information is voluntary. F	ISCLOSE AND EFFECT ON IN						

INSTRUCTIONS FOR COMPLETING USFK FORM 82-E (APPLICATION FOR INSTALLATION PASS)

SECTION I - Sponsor or Applicant will:

- 1. NAME (Name information must match national registry, ex. SSN/KID Administrations)
- 2. SEX (Check appropriate block)
- 3. KID/SSN or Passport; (Input correct numbers/information)
- 4. DOB; (4 DIGIT Year, Month, date format, ex. 19751005)
- 5. Height ; (Use inches)
- 6. Weight; (Use pounds)
- 7. Hair Color
- 8. Eye Color
- 9. Glasses, Yes or No; (Indicate Contacts if worn)
- 10. POB; (ex. Seoul, Korea or Atlanta, GA USA
- 11. Current Address in Korea (Full Civilian Off-Post Address, if DOD, Full APO Address)
- 12. Access requirements:

12.a. Input Access Area, (EX. YONGSAN, AREA 1A, Osan). Must be specific & for Official duty only.

NOTE: Request for USFK or EUSA - wide Access require Approval from the USFK Deputy Chief of Staff. Request for this type of access will be forwarded through the CFC/USFK Provost Marshall Office, Security Division (FKPM-S), for processing and submission to the USFK DCofS.

12.b.c.d.e. Input desired FPCON, ESCORT PRIVILEGES, TIME and DAYS access is required.

12.f.g. Select type of Pass, Permanent or Temporary: indicate Initial, Renewal or Update of desired Pass

(Include photocopy of current Pass, KID Card or Passport w/photo)

SHORT TERM VISITS. Personnel sponsored by US or DOD personnel may use this form when requesting this type of access. In Block #14,

specify purpose, time period of visit; not to exceed 60 days, and provide sponsor's information, visitor's personnel ID number (SSN or Passport #).

- 13. Sponsor Information (Provide all required information)
- 14. JUSTIFICATION; Provide detailed information that supports that type of Access requested. List specific locations and frequency of access.

(ex. Travel to CRC, Cp Casey, and Osan 2 X weekly to deliver Supplies) SPONSOR WILL READ and SIGN STATEMENT OF UNDERSTANDING.

SECTION II - DOD SPONSOR, CPOC OR USACCK will:

16. Provide current Grade/Rank of Applicant or Contractor

Blocks 17, 18; Provide Official Job Title and date began employment with USFK.

19. Input Official Unit or Civilian Agency Address and Telephone number. (Use USFK APO or local Korean Address)

Blocks 20, 21, 22; (This information is required data for all contractor applicants)

(If applicant is a contractor, SF Forms 26 and 30 or USFK Form 175-R MUST be submitted with this application.)

SECTION III - REQUESTING AUTHORITY will:

Indicate APPROVE OR DISAPPROVE and sign USFK Form 82-E in Section III

SECTION IV - PASS & ID Office or PMO will:

Blocks 23-28; Review Application and supporting documents. Answer YES or NO. Input correct dates regarding Background Checks and Pass pass issue data.

29. Signature of Pass & ID Section Chief or NCOIC that reviewed of application for completeness. Indicate whether documents SUPPORT or DO NOT SUPPORT approval of this pass request.

SECTION V - APPROVING AUTHORITY will:

Indicate APPROVE OR DISAPPROVE and sign USFK Form 82-E in Section V.