

DEFENSE COMMISSARY AGENCY

HEADQUARTERS 1300 E AVENUE FORT LEE, VIRGINIA 23801-1800

CCSA

NOTICE TO THE TRADE – DeCA Notice 18-21

SUBJECT: Fort Lee Access Passes

All Fort Lee installation access passes issued in 2017 will expire on April 30, 2018. This applies to contractors, volunteers, civilian employees, and vendors who are not eligible to receive a Common Access Card, but work within or regularly visit the DeCA Headquarters.

In accordance with Fort Lee's entry guidelines:

- Individuals who visit HQ DeCA less than six times per year must report to Visitor Control Center at the Lee Avenue gate to receive a single-day access pass for each visit. The Sisisky Boulevard Gate is now open 24 hours daily and is the main access point to Fort Lee.
- Individuals who visit HQ DeCA more than six times per year must complete and resubmit Fort Lee Form 190-3, Request for Unescorted Installation Access to Fort Lee, to the HQ DeCA point of contact (POC) listed below. A fillable version of this form is attached for your convenience. Forms may be faxed to the POC. Paper copies of the form can be picked up and a returned to the Headquarters reception desk. Completed forms must be received not later than close of business March 30, 2018.
- Do not email the Fort Lee Form 190-3. We have no way to open encrypted email sent from a private sector email service. We are not aware of any method to protect personally identifiable information sent by email from a private account to DoD account.
- Non-CAC-eligible individuals who work within or call on the Fort Lee Commissary must pick up Form 190-3 in the commissary administrative area and return it to the secretary.

If Fort Lee denies access due to the finding of derogatory criminal information, a waiver may be requested by completing the attached Fort Lee Form 190-4, Fort Lee Access Control Denial Waiver Application, and submitting it in accordance with the instructions attached to the form.

POC is Megan Greenlee at (804) 734-8038 FAX (804) 734-8244.

Timothy C. Ford

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Chief, Administration Division

Attachments As stated

REQUEST FOR UNESCORTED INSTALLATION ACCESS TO FORT LEE

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Title 5, USC 3331, 552, 552a; 10 USC 10204; Executive Orders (EO) 10450, 10865, and 12333.

PRINCIPAL PURPOSE: The information requested is for the purpose of granting access to the Fort Lee Installation.

ROUTINE USES: Basis for determination of qualifications and background information for eligibility for access to Fort Lee Installation. The Social Security Number (SSN), required for record accuracy, is requested pursuant to EO 9397.

DISCLOSURE: Providing requested information, to include your SSN is voluntary. However, your access may not be granted if all requested information is not provided. Contents shall not be disclosed, discussed, or shared with individuals unless they have a direct need-to-know in performance of their official duties. Deliver this document directly to the intended recipient. DO NOT drop off or send to a third-party. This document contains personal or privileged information and should be treated as "For Official Use Only (FOUO)".

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PART I - APPLICANT INFORMATION						
LAST NAME:	FIRST NAME	Ξ:	MIDDLI	E INITIAL:		
SOCIAL SECURITY I	NUMBER:		DOB:			
GENDER: Male Female	E-MAIL ADDI	RESS:				
PHONE NUMBER :	EMPLOYER:					
DRIVER'S LICENSE / ID #	STATE:	Exp Date.	RACE:			
PART II - VISITOR (N/A FOR CONTRACTORS/SUPPORT PERSONNEL) REQUESTED DATE(S): FROM:						
REQUESTED DATE(S) . FROIVI		10				
PURPOSE OF YOUR REQUEST:						
GRADUATION GO	OLF	LOCATION:				
MUSEUM BC	WLING	CONTACT NA	ME:			
VISIT FAMILY PR	RE-CAC VETTING					
OTHER	_	For long term	passes see reverse for	sponsor information		
FORT LEE INSTALLATION	ACCESS CARI		•	•		
background screenings prior to and after the issuance of an installation access card/pass by completing Fort Lee Form 190-3. Failure to do so will result in the termination of the application process. I further understand that these background screenings will determine my eligibility for access and continued access during the term of my visit. a. I understand that my access may be revoked at any time without reason or notice. b. I understand that I must properly care for my cards/pass to prevent damage, or unnecessary wear. c. I understand that it is prohibited to allow someone else to use my card/pass. d. I understand that my card/pass must be turned in to the Installation Access Office once it has expired or further use is not required. e. I understand that I must immediately report any lost, damaged or stolen card/pass to my sponsor and the military police. f. I understand that my card/pass must be controlled at all times. If you have and or know where your card/pass is, then it is considered secured! If your card/pass is lost or unrecoverable, please notify your sponsor immediately. 2. I have read and understand the instructions listed above. 3. By signing below I acknowledge that I have read and understand the Privacy Act of 1974. 4. I am not currently in possession of an authorized DoD ID card and require an unescorted Fort Lee Visitors Pass. APPLICANT'S SIGNATURE						
- ISSUING OFFICE -						
SECTION BELOW IS FOR USE BY INSTALLATION ACCESS CONTROL OFFICE ONLY						
a. APPROVED b. DISAPPROVED c. ACTION TAKEN (Specify below):						
APPROVING OFFICIAL PRINTED NAME		APPROVING OF	FICIAL SIGNATURE	DATE		

PART III - CONTRACT or SUPPORT PERSONNEL					
00170407 # 170777					
a. CONTRACT # / PURPOSE:					
	. GOVERNMENT ORGANIZATION/BUSINESS SUPPORTED:				
c. CONTRACT EXPIRES:	d. COR / SPONSOR:				
PART IV - GOVERNMENT SPONSOR'S CERTIFICATION I certify that the applicant meets the justification requirements as indicated in Part III above for access privileges. Furthermore, I certify that the applicant requires an access control card as indicated above in order to perform assigned duties or conduct official business on Fort Lee.					
a. COR/SPONSOR/PHONE NUMBER (Invalid if Incomplete)		b. COR/SPONSOR SIGNATURE (Invalid if Incomplete)			