

# **ATTENTION**

Use this space to indicate categories, limited dissemination controls, special instructions, points of contact, etc., if needed.

Controlled by: United States Air Force Controlled by: 86th Security Forces Squadron

CUI Category: FED ONLY Distribution Statement: F

POC: Installation Access Control, +49 6371-47-2301/5775

# **ATTENTION**

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Handling, storage, reproduction, and disposition of the attached document(s) must be in accordance with 32 CFR Part 2002 and applicable agency policy.

Access to and dissemination of Controlled Unclassified Information shall be allowed as necessary and permissible to any individual(s), organization(s), or grouping(s) of users, provided such access or dissemination is consistent with or in furtherance of a Lawful Government Purpose and in a manner consistent with applicable law, regulations, and Government-wide policies.

Standard Form 901 (11-18) Prescribed by GSA/ISOO | 32 CFR 2002



#### CONTROLLED UNCLASSIFIED INFORMATION WHEN FILLED IN

### KAISERSLAUTERN MILITARY COMMUNITY AIR FORCE (KMC-AF) INSTALLATION ACCESS REQUEST

Authority: KMC-AF Integrated Defense Plan and AEA Regulation 190-16 USAFE-AFAFRICA 31-207

Purpose(s): To identify personnel requiring ESCORTED/UNESCORTED access to KMC-AF installations in performance of an official duty

or to attend an event sponsored by a KMC organization or member.

**Disclosure:** Voluntary. Failure to provide any required information or to follow any instructions listed will result in delayed or denial of access.

#### **Section 1: Instructions**

### THE 86 SFS FORM 011, INSTALLATION ACCESS REQUEST (IAR) IS USED FOR:

- 1. Pre-notification of personnel traveling on a NATO Travel Order/NATO Travel Authorization/Invitational Travel Order with one of the KMC installations listed. Sections 2, 2a, 2b, and 3 must be completed. Must be submitted no later than 3 duty days prior to arrival.
- 2. Personnel attending events on KMC-AF installations and access for U.S. Based Contractors. Must be submitted no later than 10 duty days prior to the start of the event or Temporary Duty for U.S. Based Contractors.
  - a. ESCORTED: Sections 2, 2a, 2b, and 3 must be completed. Escort official must have sign-in privileges \*1 escort per 10 visitors.
  - b. UNESCORTED: Sections 2, 2a, 2b, 3, and 4 must be completed. Non U.S. citizens must submit a Good Conduct Certificate also known as a Police Report (no older than 1 year). Full SSN is required for U.S. citizens and must be annotated in Section 3, Nationality column (Example: American / 123-45-6789). NOTE: U.S. Based contractors must provide a German BACO 90, Request for Confirmation of Exemption from the Requirements to Obtain a Work Permit.

#### **OTHER REQUIREMENTS**

- Copy of Passport or European Economic Area (EEA) National ID is required for all requests.
- Send this form and required documents to 86sfs.s5i.ramsteinvcc@us.af.mil. Contact DSN: 480-2301/5775 IMMEDIATELY if there are changes prior to the event.
   Section 2: Sponsor/Event Information

#### Detailed Event Name (No Abbreviations): Section 2a: Sponsor Information Section 2b: Event Information Start Date/Time (YYYYMMDD/HHMM): End Date/Time (YYYYMMDD/HHMM): Last Name: First Name: Event Type (Select one): Middle Name: Detailed justification explaining the reason for access: Date of Birth (YYYYMMDD): Email: Work/DSN Phone Number: Select Installation (s): Cell Phone Number: **Einsiedlerhof / Warrior Preparation Center** Ramstein AB Unit or Organization: Kapaun AS **Vogelweh Housing** List additional POC(s)/Escort(s) by Rank Last, First Name/Unit/Cell Phone: Sponsor Signature and Date of Submittal

of

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Section 3: List of Personnel (Alphabetical Order)						
	Last Name, First Name	Date of Birth YYYYMMDD	Country of Birth	Nationality Include Full SSN for U.S. Citizens	Passport/EEA National ID/ NATO Military ID Number	Cell Phone with Country Code
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
For requests > 15 personnel: Click on "Add Continuation Page" on the top left of page						
Section 4: Must be completed for UNESCORTED Event Request Only						
Sponsoring KMC Unit CC or Equivalent First MI. Last Name, Rank, Unit:				Signature:	Date:	
Section 5: Installation Access Control Office Approval						
86 SFS/S5I Approving Official's First MI. Last Name, Rank				Signature:	Date:	