|  |
| --- |
| **NAVAL RESEARCH LABORATORY- MARINE METEOROLOGY DIVISION** **VISIT REQUEST & VISITOR INFORMATION****Please submit via fax (831) 656-4191 or via Safe Access File Exchange (SAFE) only**  |
| **FROM (complete address of requesting organization/company/command):** | **DATE OF REQUEST:**  |
| **Points of Contact (military or Fed. Employee, NO Contractors as POC):**  |
| **TO: Naval Research Laboratory Monterey, Code 7500** **7 Grace Hopper Ave Stop 2** **Monterey CA 93943-5501** Attn: Security Office (p)831-656-4729 (f)831-656-4191 |
| Degree of Access Required:  |
| **Duration of Visit (maximum 1 year for CAC holders, 6 months for non-CAC holders & non-affiliated visitors):** **Arrival date: \_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_ Departure date: \_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_** |
| **PURPOSE OF VISIT:**  |
| VISITOR INFORMATION |
| NAME, RANK/TITLE/POSITIONAND CONTACT INFORMATION | **SOCIAL SECURITY NUMBER/****DATE AND PLACE OF BIRTH** | **SECURITY CLEARANCE INFO** |
| **Full Name:** **Rank/Title:****Email:****Phone number:** | **SSN:****DOB:****POB:****Citizenship: US 🞎 OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Duel Citizen 🞎 Resident Alien 🞎**  | **Level:****Investigation date:****Invest. Agency:****CAC card ? Yes \_\_\_\_ No \_\_\_\_** **Foreign Government Rep? Yes \_\_\_\_ No \_\_\_\_** |
| **Full Name:****Rank/Title:****Email:****Phone number:** | **SSN:****DOB:****POB:****Citizenship: US 🞎 Resident Alien 🞎 Other 🞎** | **Level:****Investigation date:****Invest. Agency:****CAC card ? Yes \_\_\_\_ No \_\_\_\_** **Foreign Government Rep? Yes \_\_\_\_ No \_\_\_\_** |
| **Full Name:****Rank/Title:****Email:****Phone number:**  | **SSN:****DOB:****POB:****Citizenship: US 🞎 Resident Alien 🞎 Other 🞎** | **Level:****Investigation date:****Invest. Agency:****CAC card ? Yes \_\_\_\_ No \_\_\_\_** **Foreign Government Rep? Yes \_\_\_\_ No \_\_\_\_** |
| **Full Name:****Rank/Title:****Email:****Phone number:**  | **SSN:****DOB:****POB:****Citizenship: US 🞎 Resident Alien 🞎 Other 🞎** | **Level:****Investigation date:****Invest. Agency:****CAC card ? Yes \_\_\_\_ No \_\_\_\_** **Foreign Government Rep? Yes \_\_\_\_ No \_\_\_\_** |
| **NAME, RANK AND TITLE OF OFFICIAL AUTHORIZING VISIT AND CLEARANCE:** | **PHONE #:** **E-MAIL:** |
| **SIGNATURE OF AUTHORIZING OFFICIAL (required): (This form is not to be signed by the person requesting to visit**!) |

Revised APR16

**Instructions for JPAS VISIT REQUEST & VISITOR CLEARANCE submissions:**

Please submit via fax (831) 656-4191 or send using the Safe Access File Exchange (SAFE): https://safe.amrdec.army.mil/safe/Welcome.aspx and use security@nrlmry.navy.mil as the required e-mail address.

**SUBMISSIONS VIA UNENCRYPTED EMAIL ARE NOT ACCEPTED AND WILL NOT BE PROCESSED**

# JPAS:

* For GENSER visits, the NRL NRY SMO for visits is 668565
* Questions visits may be addressed to the Security Office at 831-656-4729, or:
	+ N: cynthia.karengin@nrlmry.navy.mil S: cynthia.karengin@nrl.navy.smil.mil
* For TS/SCI visits, the SMO is 631343 (Listed as FNMOC)
* Please name your Host as “NRL/HOSTNAME”
* SCI visits may be addressed to the NRLMRY Servicing SSO at FNMOC:
	+ N: FNMOC\_PGSA\_SECURITY@navy.mil S: brian.curry@navy.smil.mil J: brian.curry@fnmoc.ic.gov

# Facility Main Gate access requires a SECNAV 5512 Base Access forms if visitor(s) are non CAC holders OR the host Federal Employee (only, Contractors cannot escort) can escort all Gate Access for the duration of visit.