

REQUEST FOR VEHICLE REGISTRATION

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Title 10, USC, Sec 3012(g)

PRINCIPAL PURPOSE: The Social Security Number, Home Address and Phone Number is used for Law Enforcement purposes as an additional means of identification of subjects, suspects, witnesses or complainants and registered vehicle owners.

ROUTINE USES: Your Social Security Number is a major item used in processing machine record and output sequence for Military Police Management Information Systems.

DISCLOSURE OF YOUR SOCIAL SECURITY NUMBER AND HOME PHONE NUMBER IS VOLUNTARY: However, failure to provide this information may delay or preclude registration of a privately owned motor vehicle on the military installation.

DISCLOSURE OF YOUR HOME ADDRESS IS MANDATORY: Failure to provide this information will preclude registration of a privately owned vehicle on the military installation.

PLEASE PRINT CLEARLY AND INDICATE N/A IF NOT APPLICABLE

PART I. PERSONAL INFORMATION/SPONSOR INFORMATION

1. Name (Last, First, MI)		2. SSN	3. Type of Registration <input type="checkbox"/> Initial <input type="checkbox"/> Renewal	
4. Home Address (House/Apartment Number, Street Address, City, State, Zip Code)			5. Telephone Number (Home/Cell)	
6. Category				
<input type="checkbox"/> U. S. Army	<input type="checkbox"/> National Guard	<input type="checkbox"/> Reserves		
<input type="checkbox"/> U. S. Air Force	<input type="checkbox"/> U. S. Marine Corps	<input type="checkbox"/> U. S. Navy		
<input type="checkbox"/> U. S. Coast Guard	<input type="checkbox"/> Department of Defense Civilian	<input type="checkbox"/> Retired (Military)		
<input type="checkbox"/> Contractor	<input type="checkbox"/> Nonappropriated Fund Employee	<input type="checkbox"/> Civilian		
<input type="checkbox"/> Family Member	<input type="checkbox"/> Others (Please specify) _____			
7. Installation Assigned DLI/ FLC & POM			8. Grade/Rank	
9. Unit/Organization/Work Address (Street Address, City, State, Zip Code)			10. Work Telephone Number	
11. Common Access Card (CAC) Expiration Date (MM/DD/YYYY)			12. Building Number	

PART II. DRIVER'S LICENSE INFORMATION

13. License Number		14. Issued By (State)		15. Expiration Date (MM/DD/YYYY) XXXXXXXXXXXX
16. Birth Date (MM/DD/YYYY)	17. Gender	18. Height	19. Weight	
20. Eye Color	21. Hair Color	22. Marital Status	23. Race	

PART III. VEHICLE INFORMATION

24. Vehicle Identification Number (VIN)		25. License Plate Number		26. Issuing State
27. Expiration Date (MM/YY)	28. Year	29. Color	30. Make/Model	31. Body Style

Any person, who, with intent, signs any false record, knowing it to be false, shall be subject to prosecution by State, Federal, or Military Authorities.

32. Signature/Date	
33. Reviewed by (VRS Representative) (PRINT NAME/SIGNATURE)	34. Date

PRESIDIO OF MONTEREY POLICE DEPARTMENT USE ONLY

PARKING PERMIT NUMBER	<input type="checkbox"/> STAFF <input type="checkbox"/> COMMUTER <input type="checkbox"/> ON POST <input type="checkbox"/> CONTRACTOR	DoD DECAL NUMBER	EXPIRATION DATE (MM/DD/YYYY)
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REMARKS
