

How to complete the DEPARTMENT OF THE NAVY LOCAL POPULATION ID CARD/BASE ACCESS PASS REGISTRATION Form SECNAV 5512/1

Complete all information in black ink (printed) or by typing. Note: Signatures and initials are required in Blocks 29, 30 and 31.

Block 1: Enter Last Name

Block 2: Enter First Name

Block 3: Enter Middle Name

Block 4 (If Applicable): Check the appropriate box for Name Suffix.

Block 5: Check "Yes" if you are Hispanic or Latino, "No" if you are not Hispanic or Latino.

Block 6: Check the applicable box for race. If mixed hand write in "mixed".

Block 7: Check the applicable box for gender.

Block 8: Enter Date of Birth

Block 9: Enter City of Birth

Block 10: Enter State of Birth

Block 11: Enter Country of Birth

Block 12: Check the applicable box for US Citizenship Y/N?

Block 13: Check the applicable box for dual citizenship-Y/N? If you hold citizenship outside of the U.S. or in addition to the U.S. fill in the name of that country.

Block 14: Check off two forms of identification which you wish to site in blocks 15-19.

*****NOTE: Paperwork only calls for two forms of ID. However, base security needs your SSN as well. DO NOT write your SSN in the document. After the form is emailed to LT Vernam or LT McCullough, we will call you and get your SSN over the phone.**

Block 15: Enter Document Number located on the identity proofing source document that was checked in Block 14. Example: Driver's License Number, Passport Number etc.

Block 16: Enter the State that issued the Identity Source Document checked in Block 14.

Block 17: Enter the Country that issued the Identity Source Document checked in Block 14.

Block 18: Enter the Date that the Identity Source Document was issued.

Block 19: Enter the Date that the Identity Source Document will expire.

Block 20: Enter Weight in pounds.

Block 21: Enter Height in inches.

Block 22: Check the applicable box for Hair Color.

Block 23: Check the applicable box for Eye Color.

Block 24: Enter Home Address including City, State, Zip Code, and Home/Cellular Telephone Number.

Block 25: Enter [LCDR Chris Boehm](#) for "Base Sponsor's Name" and [410-293-5600](#) for "Sponsor Phone"

Block 26: Enter [USNA Robert Crown Sailing Center 601 Brownson Road, Annapolis MD 21402](#) for "Employer Name and Address"

Block 27: [LT Matthew Vernam 601 Brownson Road, Annapolis MD 21402](#) for "Supervisor Name and Address" and [410-293-5616](#) for "Supervisor Phone".

Block 28: Leave Blank- Robert Crown Officer will hand write in hours required for vehicle pass.

Block 29: Convicted of a Felony Y/N? **Please don't forget to initial!**

Block 30: **Initial!**

Block 31: Date and Sign

OPS OFFICER- Hand Write "V-FORM" at the top of the registration form before submitting the form to Base Security.