



U.S. Department of State Special Issuance Agency DoD Passport Application Acceptance Program

Acceptance Facility Changes Form Instructions

Passport Acceptance Facilities are required to submit the “Acceptance Facility Changes” form within five (5) business days of any change in facility information including changes to the facility’s street address, mailing address, phone number, email address, and Head of Facility. The form must be signed by the Head of Facility to certify that all information is true and correct.

Change the Facility Address (Section I)

Complete this section to update the facility’s physical and mailing addresses. The street address must be the facility’s complete physical address where passport applications are accepted by Acceptance Agents. If the facility has a separate mailing address, please provide the complete mailing address that should be used to return completed passports to the facility via UPS, FedEx, or DHL.

Change the Facility Contact Information (Section II)

Complete this section to update the facility’s phone number and email address in order for the facility to receive important notices or communications about the Passport Program. Communications from SIA to the facility email address must be distributed to all Acceptance Agents in a timely manner and retained in accordance with the Federal and Military Passport Agent’s Reference Guide. It is recommended that the Head of Facility’s email be listed if a common email address or distribution list does not exist.

Change the Head of Facility (Section III & IV)

Complete both Section III and IV if the information for the Head of Facility is different than reported on the most recent Annual Certification packet. Complete the name, title, phone number, and email address for the Head of Facility.

The Head of Facility should be someone who is designated by the installation to take on this role, has the authority to grant approval for in-person site visits or inspections, and can request or redistribute resources. The new Head of Facility is required to initial and sign Section IV (Head of Facility Eligibility) to accept responsibility for all facets of the Passport Program.

Add Alternate Point of Contact (Section III)

The Alternate Point of Contact information may be completed if the Head of Facility needs to designate an alternate contact for when s/he is not available to address issues relating to the Passport Program. Even if an Alternate POC is designated, the Head of Facility must sign all Passport Program forms.

Submission Instructions

1. Please submit an electronic copy of all completed pages of this form via email to the Special Issuance Agency’s Customer Service Office at CA-PPT-SIA-CS@state.gov and the Directorate of Executive Travel at usarmy.belvoir.hqda-oaa-dol-w.mbx.executive@mail.mil.
2. Please keep the **original** form in a permanent file at your Acceptance Facility.



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Acceptance Facility Changes

Return the complete form to:
 Special Issuance Agency, Customer Service Office
CA-PPT-SIA-CS@state.gov
 Directorate of Executive Travel
usarmy.belvoir.hqda-oaa-dol-w.mbx.executive@mail.mil

Acceptance Facility Name: _____

Installation Name: _____

Facility ID Number: _____

I. Facility Address Information

Street Address (No PO Box, APO, etc.): _____

City: _____ State/Country: _____ Zip/Country Code: _____

Mailing Address (No PO Box, APO, etc.): _____

City: _____ State/Country: _____ Zip/Country Code: _____

II. Facility Contact Information

Public Phone Number (Commercial, No DSNs): _____

Facility Email Address: _____

III. Head of Facility & Alternate Point of Contact Information

Check the box if reporting a new Head of Facility below. Section IV (Head of Facility Eligibility) must be completed and signed by the new Head of Facility to certify acceptance and compliance with Program requirements.

Head of Facility: _____ Title: _____

Email Address: _____ Phone: _____

Alternate Point of Contact: _____ Title: _____

Email Address: _____ Phone: _____

I certify that all statements on this page are true and correct.

Head of Facility Signature: _____ **Date:** _____



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IV. Head of Facility Eligibility

Complete this section only if reporting a new Head of Facility who was not reported on the facility's most recent Annual Certification packet.

The Head of Facility must be a designated representative that accepts responsibility for all facets of the DoD Passport Application Acceptance Program at this facility. The Head of Facility must initial all of the below and sign the bottom certifying s/he is in compliance.

All Acceptance Agents meet all qualifications listed in the FM PARG and on the Acceptance Agent Eligibility page of the Annual Certification.

_____ Initial

The number of trained Acceptance Agents available are able to meet demand and provide quality customer service.

_____ Initial

Every aspect of the acceptance process is void of the appearance of any impropriety, real or perceived.

_____ Initial

Acceptance Facility makes passport services equally available to all DoD customers, including members of other branches of service, DoD civilian employees, and adult or minor dependents.

_____ Initial

All Acceptance Agents have successfully completed training within the past two years.

_____ Initial

All passport forms are accessible to customers (online and/or hardcopy).

_____ Initial

Newsletters, notices, the latest version of the FM PARG, and any other correspondence about the Passport Program are available to all Acceptance Agents and new materials and correspondence are distributed in a timely manner.

_____ Initial

Copies of transmittals are kept in a secure location for 24 months and destroyed in accordance with the FM PARG.

_____ Initial

I certify that all statements initialed on this page are true and correct, and I accept responsibility for all facets of the Department of State Passport Application Acceptance Program at the facility.

Head of Facility Signature: _____

Date: _____

Print Head of Facility Name: _____

Facility ID Number: _____