



### Military Acceptance Facility Certification of Program Compliance Form

As a Passport Acceptance Facility, your office will initially, and then, annually, complete a Certification of Program Compliance and also update pertinent information regarding your facility and acceptance agents as needed. Please complete both pages of this form and submit it directly to the Special Issuance Agency's Customer Service Manager's Office (instructions on page 2).

**Check One:**    **New ( )**        **OR**        **Annual Re-Certification ( )**

Acceptance Facility Full Name: \_\_\_\_\_

Acceptance Facility Acronym: \_\_\_\_\_

Acceptance Facility ID Number: \_\_\_\_\_

Branch of Service: \_\_\_\_\_

Installation Full Name: \_\_\_\_\_

Unit/Installation's Size (Number of Personnel this Acceptance Facility Serves): \_\_\_\_\_

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

City, State/Country, Zip/Country Code: \_\_\_\_\_

Mailing Address - if different (No PO Box, APO, etc.): \_\_\_\_\_

City, State/Country, Zip/Country Code: \_\_\_\_\_

PO Box/APO/FPO Address: \_\_\_\_\_

Public/Customer Service Phone (Commercial): \_\_\_\_\_

Head of Acceptance Facility Name: \_\_\_\_\_

Head of Acceptance Facility Title (Commander, Director, etc.): \_\_\_\_\_

Head of Acceptance Facility Phone (Commercial): \_\_\_\_\_

Head of Acceptance Facility Email: \_\_\_\_\_

Number of Passport Applications Accepted (last federal fiscal year Oct. 1-Sept. 30): \_\_\_\_\_

List of Active Passport Agents Assigned to Facility (use an additional page if needed):

	<b>Full Name</b>	-	<b>Agent ID Code</b>
1.	_____	-	_____
2.	_____	-	_____
3.	_____	-	_____

List Other DoD Passport Agents/Acceptance Facilities Within 25 Miles:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_



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<input type="checkbox"/> <b>This facility can create, print, accept applications for, or amend identity documents (such as driver’s licenses or DoD ID cards)</b>
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<b>If you checked the box indicating that the Acceptance Facility can create, amend, accept applications for, or print identity documents, the Passport Program Manager or Head of Facility must initial all fields below certifying the facility is in compliance.</b>	<b>Initial</b>
Facility personnel do not have overlapping duties between passport acceptance functions and birth/identity document functions. This includes performing these duties on different hours.	
Safety paper and/or blank cardstock is stored in a secure, locked container, and not accessible to Passport Application Acceptance Program personnel at any time.	
If applicable, electronic transmittals and passport applicant information is in a separate electronic system and/or database from birth or identity document information.	
The Passport Agent’s Reference Guide (PARG), and any other passport acceptance documents, information, and correspondence, is only accessible to trained, approved Passport Acceptance Program personnel.	
Identity document printing, application acceptance, or record creation functions exist in a separate physical space from the Passport Application Acceptance Program.	

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

\_\_\_\_\_  
**Head of Facility Signature**

\_\_\_\_\_  
**Date**

**SUBMISSION INSTRUCTIONS**

- 1. Please submit an electronic copy** of both pages of this form to the Special Issuance Agency’s Customer Service Office via email at:  
[ca-ppt-sia-cs@state.gov](mailto:ca-ppt-sia-cs@state.gov).
- 2. Please keep this original form in a permanent file at your Acceptance Facility.**