



JOINT BASE PEARL HARBOR-HICKAM, HAWAII

**REQUIRED NON PROFIT CHECKLIST**

**SPONSOR MUST COMPLETELY FILL OUT BELOW CHECKLIST PRIOR TO TURNING IN**

<b><u>ITEM NUMBER</u></b>	<b><u>ITEM</u></b>	<b><u>INITIALS</u></b>
#1	<b>JB2 Form 0180 (Dated 01 May 2020)</b>	
#1A	<b>From Block</b> (Organization POC and address)	
#1B	<b>Pass Type</b> ( <i>paper pass less than 30 days/DBIDS card over 30 days</i> )	
#1C	<b>Pass Expiration</b> – Duration of Request	
#1D	<b>Days/Hours Required</b>	
#1E	<b>Location</b> (Which Area of Base e.g. Main Base, NCTAMS, Makalapa)	
#1F	<b>Requestor</b> Name/Signature(Digital or Wet)/Date/Phone/Email (Same as visitor or company POC)	
#1G	<b>Sponsor</b> Name/Signature(Digital or Wet)/Date/Phone/Email (Must be same as Sponsor listed on SECNAV Form 5512)	
#1H	<b>Command</b> Name/Signature (Digital or Wet)/Date/Phone /Email <i>Required for ALL applications over 30 days</i>	
#2	<b>Justification Letter</b>	
#3	<b>Proof of Non-Profit Status (i.e. Tax Documents)</b>	
#4	<b>Signature Letter for Sponsor on File with Pass and ID</b>	
#7	<b>SECNAV Form 5512 (Dated Apr 2014)</b>	

**BELOW LISTED INFORMATION IS FOR PASS & ID (PID) USE ONLY**

1. REQUEST RECEIVED BY - Rank & Name (Last, First): \_\_\_\_\_ / Date: \_\_\_\_\_

2. PID CLERK SYSTEM VERIFICATION	Clerk Initials
National Crime Information Center (NCIC) Background & Sex Offender Registry (SOR) Check:	
Barment Check:	
PID Clerk Name (Last, First): _____	Date: _____

3. NCOIC Review:  
(Rank/Name) \_\_\_\_\_ / Date \_\_\_\_\_ Recommend: Approved / Disapproved

4. JB21/Superintendent Review:  
(Rank/Name) \_\_\_\_\_ / Date \_\_\_\_\_ Recommend: Approved / Disapproved

5. JB2 Approval/Disapproval:  
(Rank/Name) \_\_\_\_\_ / Date \_\_\_\_\_ Recommend: Approved / Disapproved

Signature: \_\_\_\_\_

Comments: \_\_\_\_\_

**Checklist Current as of 01 May 2020 (all others obsolete/invalid)**

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