



JOINT BASE PEARL HARBOR-HICKAM, HAWAII

REQUIRED NON PROFIT CHECKLIST

NOTE: SPONSOR MUST FILL OUT BELOW CHECKLIST PRIOR TO TURNING IN REQUEST

<u>ITEM NUMBER</u>	<u>ITEM</u>	<u>INITIALS</u>
#1	JB2 Form 180	
#1A	From Block (Organization POC and address)	
#1B	Pass Type (<i>Paper Pass 30 days or less/DBIDS card 31 days or More</i>)	
#1C	Pass Expiration – Duration of Request	
#1D	Days/Hours Required	
#1E	Location of Visit (e.g. Main Base, NCTAMs, Makalapa)	
#1F	Requestor Name/Signature/Date/Phone #/Email (Same as visitor or company POC)	
#1G	Sponsor Name/Signature/Date/Phone #/Email (Digital OR Wet Signature)	
#1H	Command Name/Signature/Date/Phone #/Email for ALL applications over 30 days (Digital OR Wet Signature)	
#2	Justification Letter	
#3	Proof of Non-Profit Status (i.e. Tax Documents)	
#4	Signature Letter for Sponsor on File with Pass and ID	
#5	SECNAV Form 5512	

STOP BELOW LISTED INFORMATION IS FOR PID USE ONLY STOP

Reviewed By:
PID Clerk Initials _____ **/Date** _____

Barment/SRBW Check:
PID Clerk Initials _____ **/Date** _____

SOR Check:
PID Clerk Initials _____ **/Date** _____

NCIC Check:
PID Clerk Initials _____ **/Date** _____

NCOIC Review:
Initials _____ **/Date** _____ **Recommend: Approved / Disapproved**

OIC/Superintendent Review:
Initials _____ **/Date** _____ **Recommend: Approved / Disapproved**

CSO Approval:
Signature: _____ **Approved / Disapproved**
Comments: