

Military Police Vehicle Registration System

Registered Personnel Add

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Title 10, U.S.C., Sec 3013(g); 5 U.S.C., Sec 301; EO 9397; CBks Reg. 190-5

PRINCIPAL PURPOSE: For Law Enforcement purposes as a means of identification of subjects, suspects, witnesses, or complainants.

ROUTINE USES: Used in processing machine record and output sequence for Military Police Management Information Systems. Information may be disclosed to State law enforcement and motor vehicle departments to aid in accident reporting and driver identification.

DISCLOSURE: Voluntary. However, failure to provide information may delay or preclude registration of a privately owned vehicle on the military installation.

Personal Information

Sponsor's Rank _____ Sponsor's SSN
(SFC, LTC)

Your SSN

Last Name _____ First Name _____ Middle Name _____

Drivers License # _____ Licensing State _____

Category: Active Retired Family Member DoD Civ. Contractor

Branch: Army Navy Marines Air Force Coast Guard

Regular Reserve National Guard

Birth Date _____ Gender _____ Height _____ Weight _____ Eye Color _____

Hair Color _____ Marital Status _____ Race _____

Home Address

Address _____

City _____ State _____ Zip Code _____

Phone _____

Unit Address

Unit _____ City _____

State _____ Zip Code _____

COMPLETE VEHICLE INFORMATION ON OTHER SIDE

Decal Number _____

Expiration Date _____

Vehicle Information

Vehicle Identification # (VIN) _____

Vehicle Year _____ Vehicle Make _____ Vehicle Model _____
(Ford, Toyota, etc) (Taurus, Camry, etc)

Vehicle Body Style (Check One)

- a) 2-Door Sedan b) 3-Door Sedan c) 4-Door Sedan d) Pickup Truck e) SUV
- f) Van g) Station Wagon h) Motorcycle i) Motorhome j) Convertible

k) Other _____
(Explain)

Vehicle Color _____

Vehicle Lic/Plate # _____ Vehicle Lic/Plate State _____

Vehicle Lic/Plate Expires _____

Insurance Company Name _____ Policy # _____

Insurance Expiration Date _____

Decal Number _____ Expiration Date _____

Additional Vehicle Information

Vehicle Identification # (VIN) _____

Vehicle Year _____ Vehicle Make _____ Vehicle Model _____

Vehicle Body Style (Check One)

- a) 2 Door Sedan b) 3 Door Sedan c) 4 Door Sedan d) Pickup Truck e) SUV
- f) Van g) Station Wagon h) Motorcycle i) Motorhome j) Convertible

k) Other _____
(Explain)

Vehicle Color _____

Vehicle Lic/Plate # _____ Vehicle Lic/Plate State _____

Vehicle Lic/Plate Expires _____

Insurance Company Name _____ Policy # _____

Insurance Expiration Date _____