

GENERAL DYNAMICS BATH IRON WORKS

U.S. CITIZEN NON-EMPLOYEE ACCESS REQUEST FORM

STOP! If you cannot verify you are a U.S. Citizen or are here representing/working for a company incorporated outside the United States, you may not use this form. Complete a Non-U.S. Citizen Visitor Access Request, instead.

Directions for Visitors:

- For escorted access, please complete Section I
- For unescorted access, please complete Sections I & III
- All Visitors / vendors must complete the liability waiver

Directions for BIW Sponsor:

- Complete and sign Section II

I. VISITOR INFORMATION FOR ESCORTED ACCESS	LAST NAME:	FIRST NAME:	MIDDLE NAME:				
AGE (in years):	ORGANIZATION / COMPANY:		CELL PHONE NUMBER :				
BIW POINT OF CONTACT:		DATE(S) OF VISIT:	PREVIOUS BIW EMPLOYEE? <input type="checkbox"/> YES <input type="checkbox"/> NO				
PURPOSE OF VISIT: <input type="checkbox"/> MEDICAL APPT <input type="checkbox"/> JOB INTERVIEW <input type="checkbox"/> VENDOR ACTIVITY (REPAIR/DELIVERY) <input type="checkbox"/> MEETING <input type="checkbox"/> OTHER: _____							
LOCATION OF VISIT: (select all that apply) <input type="checkbox"/> MAIN SHIPYARD <input type="checkbox"/> TECH CENTER <input type="checkbox"/> STRUCTURAL FAB <input type="checkbox"/> LEAVITT DRIVE <input type="checkbox"/> CROF <input type="checkbox"/> OUTFIT FAB <input type="checkbox"/> CONSOLIDATED WHSE <input type="checkbox"/> TRAINING ACADEMY <input type="checkbox"/> WEST BATH WHSE <input type="checkbox"/> PORTLAND WHSE <input type="checkbox"/> LEWISTON WHSE <input type="checkbox"/> SWEETSER WHSE							
Visitor/vendor/contractor has reviewed and agree to abide by the following documents [www.gdbiw.com/suppliers/visiting-vendors-contractors] (visitor/vendor/contractor initials below each): <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"><u>Applicable to all Visitors, Vendors and Contractors</u></td> <td style="width: 50%; border: none;"><u>Applicable to Visiting Vendors & Contractors only</u></td> </tr> <tr> <td style="border: none;"> My organization is incorporated to do business in the United States _____ Visitor Safety Video _____ BIW Privacy Notices (gdbiw.com/privacy) _____ </td> <td style="border: none;"> Environmental, Health & Safety Policy _____ Visiting Vendor Safety Information _____ Environmental, Health & Safety Handbook _____ </td> </tr> </table>				<u>Applicable to all Visitors, Vendors and Contractors</u>	<u>Applicable to Visiting Vendors & Contractors only</u>	My organization is incorporated to do business in the United States _____ Visitor Safety Video _____ BIW Privacy Notices (gdbiw.com/privacy) _____	Environmental, Health & Safety Policy _____ Visiting Vendor Safety Information _____ Environmental, Health & Safety Handbook _____
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II. BIW SPONSOR INFORMATION	SPONSOR'S LAST NAME:		SPONSOR'S FIRST NAME:				
SPONSOR'S BADGE #:	SPONSOR'S DEPARTMENT:	SPONSOR'S CONTACT NUMBER:					
JUSTIFICATION FOR VISIT: _____ I have taken reasonable steps to verify my visitor's organization is incorporated to do business in the United States. (please initial) _____ Escort Acknowledgment for unbadged visitors (please initial): <ul style="list-style-type: none"> • I understand and will comply with my responsibilities to ensure my visitor is escorted at all times while on BIW property • I will ensure that my visitor will comply with all safety and security requirements • I will ensure my visitor will not take any photographs or access any BIW computers / systems / networks • I understand that I cannot escort more than six visitors at one time. 							
BIW Employee Signature: _____		Date: _____					

Visitor (Last Name, First Name): _____

III. ADDITIONAL INFORMATION FOR UNESCORTED ACCESS		DATE OF BIRTH:	COUNTRY OF BIRTH:	CITY / STATE OF BIRTH:
GENDER:	DUAL CITIZENSHIP: <input type="checkbox"/> YES <input type="checkbox"/> NO	LIST ANY ADDITIONAL CITIZENSHIP(S) (select N/A if none) <input type="checkbox"/> N/A		
EMPLOYER'S NAME AND ADDRESS (include city, state, zip code)		SUPERVISOR'S NAME		SUPERVISOR'S PHONE
HOME ADDRESS (include city, state, zip code)		EMERGENCY CONTACT NAME:		EMERGENCY CONTACT PHONE:

I have submitted my background check to vendorsecurity@gdbiw.com for review and approval

IV. VISITOR CONTROL STAFF USE ONLY		
VISITOR / VENDOR BADGE NUMBER:	BADGE ISSUE DATE:	BADGE EXPIRATION DATE:
<input type="checkbox"/> BACKGROUND CHECK VERIFIED	<input type="checkbox"/> SIGNED INDEMNITY WAIVER	VISITOR CONTROL Initials _____

Access Approved By: _____ **Date:** _____

Document Type	Proof of Identity	Proof of US Citizenship	Meets background check requirement
US Passport / US Passport card	<input type="checkbox"/>	<input type="checkbox"/>	
State-issued driver's license	<input type="checkbox"/>		
State-issued Real ID	<input type="checkbox"/>		
Department of Defense CAC (Common Access Card)	<input type="checkbox"/>		
Transport Workers Identification Card (TWIC)	<input type="checkbox"/>		<input type="checkbox"/>
State-issued Commercial Drivers' License (CDL) with TSA Hazardous Material (HAZMAT) endorsement	<input type="checkbox"/>		<input type="checkbox"/>
Official certified state birth certificate		<input type="checkbox"/>	
US Naturalization Certificate (Form N600)		<input type="checkbox"/>	
US Native American Enhanced Tribal Card	<input type="checkbox"/>	<input type="checkbox"/>	
Defense Information System for Security (DISS) request		<input type="checkbox"/>	<input type="checkbox"/>