

**U.S. DEPARTMENT OF ENERGY
 WESTERN AREA POWER ADMINISTRATION
 BUILDING ACCESS CARD REQUEST**

Agency Code 121

Categories:	Hours Limitation:
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SECTION I (TO BE COMPLETED BY EMPLOYEE AND SUPERVISOR)

Employee				
3. Employee Last Name:	First Name:	MI:	4. Org. Code:	5. Telephone: - -
Supervisor				
Request the individual identified above be issued a Government Access Card. I certify that access to Western Headquarters facilities/offices is required for this individual to accomplish assigned duties.				
6. Federal Supervisor's Signature:				7. Date: / /
8. Printed Name and Title:				9. Org. Code:

SECTION II (TO BE COMPLETED BY SECURITY PERSONNEL AND EMPLOYEE)

Access Card Issue	
10. Access Card Number:	11. Issued By:
Receipt	
I certify that I have received the Government Access Card as described above. I understand that this access control card is the property of the United States Government, and that I am personally responsible for it and its use at all times while it is assigned to me. I will return it to Western upon termination of employment, transfer from the agency, or upon demand by the issuing agency. DO NOT ALLOW ANY OTHER PERSON TO USE YOUR CARD.	
12. Employee Signature:	13. Date: / /

SECTION III (TO BE COMPLETED BY SECURITY PERSONNEL)

Access Card Return	
14. Access Card Number:	
I certify that I have received the Access Card described above. This card has been reported for deletion.	
15. Security Personnel Signature:	16. Date: / /
17. Printed Name and Title:	18. Date Deleted: / /