## U.S. NAVAL SUPPORT ACTIVITY SOUDA BAY, CRETE, GREECE BASE ACCESS

## PRINT CLEARLY IN BLOCK LETTERS EXAMPLE: SMITH, JOHN J., BM1

Date of Request:

## ILLEGIBLE OR INCOMPLETE REQUESTS WILL <u>NOT</u> BE PROCESSED

5530 Ser 60/

	DD-MMM-YYYY (Example 01 JUN 20	019)	
From	: (Sponsor, Dept Head, Officer in Charge - Name, Rank,		
		, Department, Contact Num	ber)
	Security Officer, NSA Souda Bay		
Subj	: BASE ACCESS REQUEST		
	Respectfully request access to Naval Sugh the Mouzouras Gate, for the personneify that the information is complete and co	l listed below. E	
If requesting more than 10 personnel, place "See Attached List of # of personnel" on the 1st line ALL names must be on an attached list in alphabetical order. If # is not DOD, a color copy of the ID must be presented with the attached list as well.			
	NAME LAST, FIRST, MI	DOD ID, Gr. ID, or PP#	NATIONALITY, RANK, SERVICE
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
2. Base access is for the periodto(DDMMMYYYY) (DDMMMYYYY)  3. Purpose for access: \[ \text{PCS In/Out } \text{ Temp Duty } \text{ Dependent/Family } \text{ Transient Military}			
4.	. Reason for Visit:		
5.	5. Point of Contact:		
		APPROVED:	
(5	SIGNATURE OF REQUESTOR SPONSOR, UNIT COMMANDER, OR OFFICER IN CHARGE)	NSA SB SECURITY OFFICER OR DESIGNEE (CDO-AFTER HOURS ONLY)	
		APPROVED:	
	NAME AND SIGNATURE OF ID VERIFING OFFICAL VCC STAFF OR NSA SB PATROL OFFICER OR CDO AFTER HOURS ONLY)	GREEK REPRESENTATIVE	