

DIVISION OF PROTECTIVE SERVICES CAPITOL POLICE

STATE OF WEST VIRGINIA ACCESS CARD/ID BADGE/BACKGROUND INQUIRY REQUEST FORM

Access Card Number

- | | |
|--|---|
| <input type="checkbox"/> Contractor/Vendor | <input type="checkbox"/> Press |
| <input type="checkbox"/> Background Inquiry <input type="checkbox"/> Access Card | <input type="checkbox"/> ID Badge Expiration: _____ <input type="checkbox"/> Photo attached (contractors only) |
| <input type="checkbox"/> Modification <input type="checkbox"/> Cancel Card | <input type="checkbox"/> Card Returned <input type="checkbox"/> Card not returned |

Please report lost or stolen access cards/ID Badges immediately to the Division of Protective Services access card coordinator at 558-4443, or the main office at 558-9911. Replacement cost for a lost or stolen access card or ID Badge is \$10.00 (cash, money order, or check payable to Division of Protective Services). Email forms with photos to: margaret.m.cash@cappd.wvsp.gov

Please print the following personal information:

Name: (Last, First, M.) _____

Mailing Address: _____

Home Phone: _____ Cellular Phone: _____ Date of Birth: _____

Agency Awarding Contract/Contact Name/Phone: _____

Company Name/Contact Name/Business Phone: _____

Type of Work: _____ Building # _____ Work Area: _____

Driver's License Number/State: _____

Vehicle Information: _____

Year	Make	Model	Color	Vehicle License Number
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Person to contact in case of an emergency: _____

Relationship: _____ Phone Number: _____

Building Access Requested

Building: ☐01 ☐03 ☐04 ☐05 ☐06 ☐07 ☐09 ☐10 ☐11 ☐15 ☐16 ☐17 ☐20 ☐21 ☐22 ☐23 ☐24 ☐25 ☐27 ☐32 ☐33 ☐34 ☐36 ☐37 ☐53 ☐54 ☐74 ☐84 ☐86 ☐88 ☐97 ☐ Plaza East ☐ DNR Forks of Coal ☐ DOH Weston ☐ DOH Dry
Branch ☐ Economic Development

Access Time Requested: ☐ Public Hours M-F ☐ Extended Business Hours (530am- 7:30pm) M-F
☐ Extended Business Hours (530am- 7:30pm) M-SSH ☐ 24/7
 Access needed on: ☐ Saturdays ☐ Sundays ☐ Holidays
 Access needed in other Buildings: ☐ Yes ☐ No If yes, which buildings: _____

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Agency Access Card Coordinator	Signature	Date	Requesting Agency Phone Number
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Applicant Background Inquiry

Pursuant to West Virginia Code 15-2D-3 (e), service providers, such as vendors or contractors, whose employees are regularly employed on the grounds or in the buildings of the Capitol complex, or who have access to sensitive or critical information, are required to submit to a fingerprint based criminal history investigation completed by both the West Virginia State Police and Federal Bureau of Investigation. Privacy Act Statement Attached.

Applicants are required to complete this application and forward the same to the Division of Protective Services before fingerprints are submitted at IdentoGo (Idemia). Applicants have the opportunity to complete or challenge the accuracy contained in the FBI identification record. The procedures for obtaining a change, correction, or updating of your FBI criminal history record are set forth in Title 28, Code of Federal Regulations (CFR), Section 16.34.

Applicant's Signature: _____