

U.S. CUSTOMS AND BORDER PROTECTION

Department of Homeland Security

Customs and Border Protection Badging hours are 0900 – 1300 Tuesday - Friday

The application process requires two major forms of identification:

Valid State (DPS) issued ID card or Driver's License AND one additional form of ID listed below:

- Social Security Card
- Active military ID Card
- U.S. Passport
- Medical card displaying social security number

All applicants are required to present the following completed forms:

Customs Form 3078: (Application for Identification Card). No photo is required. (Please ensure that this application is completed fully before seeking access from the CBP Badge Office)

Access Request Form: Completed by employer and signed by an authorized person (The authorized person must have a signature on file with the City of Houston Badging Office). **It must specify the required information such as the job description along with the type of access needed.**

City of Houston Security Clearance Request Form: Obtain this form from the City of Houston, Administrative Office (Badging Office) Terminal A.

IF A FOREIGN BORN APPLICANT IS NOW A U.S. CITIZEN, HE/SHE WILL NEED TO PRESENT AT LEAST ONE OF THE FOLLOWING ORIGINAL DOCUMENTS LISTED BELOW IN ADDITION TO THE TWO MAJOR FORMS OF IDENTIFICATION ABOVE.

- Naturalization Certificate
- U.S. Passport
- DOD Certificate for birth of U.S. Citizen born to military parents

IF THE APPLICANT IS NOT A U.S. CITIZEN, HE/SHE WILL NEED TO PRESENT THE FOLLOWING ORIGINAL DOCUMENTS LISTED BELOW IN ADDITION TO THE MAJOR FORMS OF IDENTIFICATION:

- I-551 Resident Alien Card
- Form I-688 Employment Authorization

If a foreign born applicant arrives **without** one of the above original documents, **THE APPLICATION WILL NOT BE PROCESSED**

CBP Security Area Bond: Any contracting company that is sponsored by another company to work in the IFIS area (Customs) will need to purchase a Customs Security Area Bond for their employees who will need the Customs Security Access.

If you have any questions concerning the badging process please contact CBP Officer Samuels at (281) 230-4640 / 4641.

DEPARTMENT OF HOMELAND SECURITY
Bureau of Customs and Border Protection

APPLICATION FOR IDENTIFICATION CARD

19 U.S.C. 66, 1551, 1555, 1565, 1624, 1641;
19 C.F.R. 112.42, 118, 122.182, 146.6

OBM. No.
1651-0008
See back of form
For Paperwork
Reduction Act
Notice and
Privacy Act Notice

Please Type or Print

| | | | | | | | |
|--|---|---|---|--|--|--|--|
| 1. TYPE OF ACTIVITY REQUIRING IDENTIFICATION CARD | | | | | | 2. DATE OF THIS APPLICATION | |
| <input type="checkbox"/> Cartman/ Lightman | <input type="checkbox"/> Broker's Employee | CBP <input type="checkbox"/> Security Area Identification | <input type="checkbox"/> Warehouse Officer or Employee | <input type="checkbox"/> Container Station Employee | Foreign <input type="checkbox"/> Trade Zone Employee | <input type="checkbox"/> CES Employee | |
| 3. NAME (Last, First, & Middle) | | | | | | 4. SOCIAL SECURITY NUMBER | |
| 5. LIST ANY OTHER NAMES YOU HAVE EVER BEEN KNOWN BY (Nicknames, aliases, etc) | | | | | | 6. DATE OF BIRTH | |
| 7. HOME ADDRESS (Number, Street, City, State, and Zip) | | | | 8. NAME AND ADDRESS OF PRESENT EMPLOYER | | | |
| 9. HOME PHONE NUMBER | | | | 10. BUSINESS PHONE NUMBER | | | |
| 11. PLACE OF BIRTH | | 12. HEIGHT | 13. WEIGHT | 14. COLOR HAIR | 15. COLOR EYES | | |
| 16. VISIBLE SCARS OR MARKS | | | | | | | |
| 17. U.S. COAST GUARD PORT SECURITY CARD NUMBER | | | | 18. U.S. MERCHANT MARINE CARD NUMBER | | | |
| 19. HAVE YOU EVER APPLIED FOR A CARD IN ITEM 17 OR ITEM 18? <input type="checkbox"/> YES <input type="checkbox"/> NO (Skip items 20 and 21) | | | | 20. HAS APPLICATION FOR EITHER CARD IN ITEM 17 OR ITEM 18 BEEN DECLINED? <input type="checkbox"/> YES (If Yes, explain in Item 21) <input type="checkbox"/> NO (Skip Item 21) | | | |
| 21. EXPLANATION OF APPLICATION DENIAL | | | | | | | |
| 22. LIST ALL RESIDENCES DURING THE LAST 5 YEARS (List in reverse order, beginning with the present address) | | | | | | | |
| DATES | | Number and Street | | | City | State | |
| From | To | | | | | | |
| | PRESENT | | | | | | |
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| 23. HAVE YOU EVER SERVED IN THE ARMED SERVICES OF THE U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | 24. BRANCH OF SERVICE | | | |
| 25. DATES OF SERVICE | | | | 26. SERIAL NUMBER | | 27. TYPE OF DISCHARGE | |
| 28. IF DISCHARGE WAS OTHER THAN HONORABLE, EXPLAIN IN FULL DETAIL | | | | | | | |
| 29. HAVE YOU EVER APPLIED FOR AN IDENTIFICATION CARD WITH THE BUREAU OF CUSTOMS AND BORDER PROTECTION? | | | | | | <input type="checkbox"/> YES (if Yes, explain details) <input type="checkbox"/> NO | |

| 30. PREVIOUS EMPLOYMENT – LIST IN CHRONOLOGICAL ORDER, GIVING EARLIEST EMPLOYMENT FIRST (<i>Last 10 Years</i>) | | | | |
|---|---|---------------------------|--|-----------------------------|
| DATES | | EMPLOYER NAME AND ADDRESS | OCCUPATION | |
| From | To | | | |
| | | | | |
| 31. HAVE YOU EVER BEEN CONVICTED OF ANY CRIME OR OFFENSE (<i>Other than traffic violations, you may exclude any items which occurred before your 16th birthday</i>) IN THIS COUNTRY OR ELSEWHERE? | | | <input type="checkbox"/> YES (if YES, explain in Item 32.) | <input type="checkbox"/> NO |
| 32. EXPLANATION OF ALL CONVICTIONS (<i>Federal, State, Military, or Foreign</i>) | | | | |
| Date | Place | Charge | Court | Final disposition |
| | | | | |
| 33. DO YOU NOW USE OR HAVE YOU EVER USED NARCOTIC DRUGS? | | | <input type="checkbox"/> YES (If YES, explain below) | <input type="checkbox"/> NO |
| | | | 34. ATTACH PHOTOGRAPH HERE | |
| 35. CERTIFICATION | I certify that all of the statements made in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. | | SIGNATURE X | DATE |
| <p>Paperwork Reduction Act Notice: The Paperwork Reduction Act of 1995 says we must tell you why we are collecting this information, how we will use it, and whether you have to give it to us. We ask for this information to carry out the Bureau of Custom and Border Protection laws of the United States. This form is used by licensed cartmen or lightermen or their employees as an application to apply for a CBP identification card and is required to obtain or retain a benefit. The estimated average burden associated with this collection of information is 15 minutes per respondent or recordkeeper depending on individual circumstances. The valid OMB Control number for this Information Collection is 1651-0008</p> <p>Pursuant to the requirements of Public Law 93-579 (Privacy Act of 1974), notice is hereby given that the authority to collect information on Form CBP-3078 is 5 U.S.C. 301, Reorganized Plan No. 1 of 1950; 19 U.S.C. 1551, 1565, 1624, 1641; 19 CFR 112.42. The principal purpose of collecting the information is to enable the CBP to conduct a background investigation and thereby determine whether the applicant meets the criteria required for the issuance of an identification card. The information collected and contained in the applicant's file may be provided to those employees of the CBP who have a need for the records in the performance of their duties. The information may also be used, when deemed appropriate, in a proceeding to revoke or suspend the identification card. Disclosure of all information requested on Form CBP-3078 is voluntary; however, failure to disclose some or all of this information may result in the CBP's inability to conduct the required background investigation.</p> | | | | |

CUSTOMS AND BORDER PROTECTION SECURITY ACCESS REQUEST

To : Customs And Border Protection Airport Security Coordinator

From : _____
NAME OF EMPLOYER

Request is hereby made for security area access authorization for the following employee:

NAME : _____
DATE OF BIRTH : _____
SSN : _____
ADDRESS : _____
CITY, STATE & ZIP CODE : _____

EMPLOYEE JOB DESCRIPTION: (MUST BE COMPLETED BY EMPLOYER)

- | | |
|---|---|
| <input type="checkbox"/> Baggage Handler | <input type="checkbox"/> Ramp service Agent |
| <input type="checkbox"/> Aircraft Mech./Maintenance | <input type="checkbox"/> Passenger Service Agent |
| <input type="checkbox"/> Ramp (Aircraft Cleaning) | <input type="checkbox"/> Construction Projects (IFIS) or (Ramp) |
| <input type="checkbox"/> Aircraft Refueler (Ramp) | <input type="checkbox"/> HAS / Public Safety |

REASON FOR CUSTOMS SECURITY ACCESS:

Required to conduct routine and frequent security inspections and respond to security issues concerning the entire airport environment to include the CBP building and ramp areas.

BACKGROUND CHECK: (Check one):

For persons hired on or after November 1, 1985

A background check has been performed on the applicant, to the extent allowable by law, including at a minimum, references and Employment history has been verified for the preceding 5 years. To the best of my knowledge, the applicant meets the conditions necessary to conduct duties in the Customs and Border Protection security areas outlined in 19 CFR 122.181 – 188.

For persons hired prior to November 1, 1985

The listed applicant began uninterrupted employment with this company prior to November 1, 1985. To the best of my knowledge, the Applicant meets the conditions necessary to conduct duties in the customs and Border Protection security areas outlined in 19 CFR 122.181 – 188.

Employer Authorized _____ Company _____
Signature

OFFICIAL USE ONLY

TO: Department of Aviation _____ IFIS / USCB _____ Ramp / USCR

The following CBP access authorization is granted to the above-named individual:

DATE: _____ BY: _____
INSPECTOR, CUSTOMS AND BORDER PROTECTION