

United States Department of Labor/Frances Perkins Building
Personal Identity Verification (PIV) Card Application

Section I – To be completed by all applicants

Date of Request: _____ **Agency:** _____

First Name: _____ **Middle Initial:** ____ **Last Name:** _____

Room Number: _____ **Phone Number:** _____

Request Type: New – (complete section II)
Replacement- A memo is required (*Lost/ Stolen/ Renewal/ Damage/ Other*)

Circle all that apply: Federal * Contractor * LEO * Emergency Response Official

Building: (circle one) **FPB** Other (_____)

Section II – To be completed by New Applicants Only

Social Security Number: _____

D.O.B: _____ **Height:** _____ **Sex:** _____ **Weight:** _____

Country of Citizenship: _____ **Race:** _____

Eye Color: _____ **Hair Color:** _____ **Place of Birth:** _____

Section III - To be completed by ID Issuing Office Only

Printed Name of Issuer: _____

New Applicant's Temp Badge Number: **NO-**_____: Temp Expiration Date: _____

Transmit Fingerprint?: (circle one) Yes No

Transaction Control Number (TCN): _____

Notes: _____

Your Social Security Number is needed to keep records accurate, because other people may have the same name. Executive Order 9397 asks Federal agencies to use a persons social security number to help identify individuals in agency records.

Information provided is covered under the
Privacy Act 1974