

PMO USE ONLY		
Sticker Number	DoD Decal Number	Sticker Expires Last Day of (MM/YYYY)

PRIVACY STATEMENT

AUTHORITY: 10 USC, SECTION 3013(G)

PURPOSE: To obtain a descriptive data record of all personnel involved as the subject, victim, witness or complainant of a military police report. The social security number is used for identification of personnel involved.

ROUTINE USES: Information may be released IAW AR 340-21, para 2-3.

DISCLOSURE: Disclosure is voluntary, however, failure to provide the information requested may cause a delay in processing of subject, all others, no effect.

NAME (Last, First, Middle): _____

SSN: _____ **DEPT/PHONE:** _____

READ THE FOLLOWING CAREFULLY

I must work or be conducting government business in the Central Post Area on a routine basis to qualify for a CPA Sticker.

The CPA Sticker must be displayed at the bottom of the driver's side rear window. Failure to comply with this regulation may result in a parking citation.

I understand that the CPA Sticker is a numbered and controlled item. If the Sticker is lost or stolen, I must notify the Military Police as soon as possible to provide a written sworn statement. I will not be eligible to receive a replacement CPA Sticker or be cleared for PCS/ETS until a statement is provided.

Prior to my departure from West Point, the CPA Sticker will be removed from the vehicle and returned to the Military Police Station.

Upon termination of working or conducting official business in the Central Post Area on a routine basis, the CPA Sticker must be removed from the vehicle and returned to the Military Police Station within 5 working days.

My signature below indicates that I have read and will comply with the standards listed above.

APPLICANT'S SIGNATURE: _____
ACTIVITY DIRECTOR/DESIGNATED REPRESENTATIVE

(LTC/YC02/GS12 OR ABOVE)

SIGNATURE: _____

PRINTED NAME, RANK AND TITLE: _____

DEPARTMENT/PHONE#: _____