

**APPEAL REQUEST**

ref. MCIPAC-MCBBO 11240.1, USFJ HQ INST 31-205

**Privacy Act Statement**

**AUTHORITY:** MCIPAC-MCBBO 5560.1B; MCIPAC-MCBBO 5560.2B; 10 U.S.C. 5013, Secretary of the Navy; and 10 U.S.C. 5014, Headquarters, Marine Corps authorizes the collection of this information. **PRINCIPLE PURPOSE(S):** PMO Traffic Court section will use this information to track and prosecute offenses, counsel victims, and other administrative actions; to support insurance claims and civil litigation; to revoke base, station, or activity driving privileges. **ROUTINE USES:** To individuals involved in base incidents, their insurance companies, and/or their attorneys for the purpose of adjudicating a claim, such as personal injury, traffic accident, or other damage to property. The release of personal information is limited to that required to adjudicate a claim. The information will also be used by PMO administrators and disclosed to law enforcement personnel to assist in activities related to traffic moving violations. The traffic Court section may share the information with other law enforcement agencies and the MCIPAC Base Magistrate's office as necessary to keep an accurate database of violator's driving record. **DISCLOSURE(S):** Disclosure of the requested information is voluntary; however, failure to provide this information will require our section to attempt to obtain this information through other means. Additionally, failure to provide all of the requested information may result in a delay in processing your appeal request, or in the denial of your appeal request.

**1. REQUESTOR INFORMATION**

a. Last Name	b. First Name	c. Middle Initial	d. Rank
e. DoD ID	f. SOFA License Number	g. EDIPI Number	
h. Unit	i. Requestor Signature		j. Email

**2. REQUESTOR ACTION**

a. Type of Corrective Measures Taken	b. Date Completed
<input type="checkbox"/> SACC	
<input type="checkbox"/> REMEDIAL DRIVING COURSE	
<input type="checkbox"/> OTHER ( <i>Specify</i> ):	

**3. STATEMENT (*Reason For Request*)****4. COMMANDER ENDORSEMENT**

a. Command Justification for Request			
b. Command Action Taken for Initial Offense <input type="checkbox"/> NO ACTION TAKEN		c. Initiation Date	d. Complete Date
e. Type Of Action			
f. Commanding Officer/ GS-Supervisor Name ( <i>LAST, FIRST, MI</i> )		g. Unit	
h. Commanding Officer/ Supervisor Signature		i. Date	j. Phone Number