TRAFFIC COURT OFFICE ASSESSMENT 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-MCBB 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 will result in a delay in processing time and/or the ability to fulfill the request.

| 1. IDENTITY INFORMATION | | | | | | |
|---|-----------|---|--|----------------------|---------------------------|--|
| a. Last Name | | b. First Name | | c. Middle Initial | d. Suffix | |
| e. DODID | | f. EDIPI Number g. SOF. | | g. SOFA L | A License Number | |
| | | | | | | |
| h. Unit | | i. E-mail Address | | | j. Phone Number | |
| 2. TYPE OF REQUEST | | | | | | |
| a. Point Assessment | | | □ b. Citation Assessment | | | |
| The Traffic Court Office assigned | (1) REQUE | STED FOR SELF | Citations are issued for | | (1) CITATION INFORMATION: | |
| to MCIPAC-MCB Camp Butler utilizes a point system for | | | vehicle moving or non- violations by Military P | | Citation Number: | |
| substantiated violations. | | | Japanese Police in accordance | | | |
| Offenders are subjected to a license suspension or revocation (2) REQUE | | STED FOR | with MCIPAC-MCBBO | | Date Issued: | |
| license suspension or revocation once 12 points or more have been accumulated with a 12-month period, or 18 points or more within a 24-month period. Points assessed will remain in effect for 24 consecutive months after the date of the point [2] REQUED DEPENDE Name: License N E-mail: | | • | An assessment may be conducted to determine the outcome of the citation and to | | Location (Base): | |
| | | | | | 2004.10.11 (2400). | |
| | | | inform the offender if they will be required to appear in court. Whe | | (2) OFFICER INFORAMTION: | |
| | | umber: | a request for citation assessment | | Rank: | |
| | | is made a traffic court administrator will review | | w vour | Last Name: | |
| assessment per violation. This is | | | driving record. The traf | fic court | Last Name. | |
| done in accordance to MCIPAC-MCBBO 5560.2B. A complete Phone Nu | | mber: | administrator will subse | | Badge Number: | |
| chart of the traffic violations can | | | requestor of the results from the | | | |
| also be located in the aforementioned order. If an | | Remarks: | citation. | | Work Extension: | |
| offender is unsure of the number | | | | | (3) CURRENT VEHICLE | |
| of points on their record, an assessment may be conducted | | | | | INFORMATION | |
| with the submission of this form | | | | | Make: | |
| by a traffic court administrator. | | | | | Model: | |
| | | | | | Plate Number: | |
| | | | | | Year: | |
| | | | | | Color: | |
| | | | | | | |
| 3. REQUESTOR'S ENDORSEMENT | | | | | | |
| a. Requestor's Signature | | | b. Date | | c. Requestor Phone Number | |
| | | | | | | |
| d. Sponsor Name (<i>Last, First, M.I.</i>) | | | e. Unit | | | |
| | | | | | | |
| f. Sponsor Signature | | | g. Date | | h. Sponsor Phone Number | |
| - | | | | | - | |