w	<u>R</u> egister	<u>A</u> dministration	Reports	Application	
rso	n Registra	ation			
	Register	Can	cel		
			DoD ID c All other	ardholders: S cardholders: (can the Code 39 barcode. Complete the data fields and then click Register.
			* Require	d Fields	
			Persor	al Informati	on
				'First Name:	
			M	iddle Name:	
				*Last Name:	
				Suffix:	
			*[)ate of Birth:	(MM/DD/YYY)
			∣dentif	ier —	
			*lde	entifier Type:	SSN 🗸
			Ider	ntifier Issuer:	-
			*lde	ntifier Value:	
				Issue Date:	(MM/DD/YYYY)
			Exp	iration Date:	(MM/DD/YYYY)

Φιγυρε 1. DBIDS Person Registration Screen

Φιγυρε 2. Add Identifier Button in Person Record Screen

DBID	95 Worksta	tion - FOR OFFICIAL USE C	INLY			
⊻iew	<u>R</u> egister	Administration Reports	Application			
Perso	n Record					
i e	dit Person	Add <u>I</u> dentifier	Update Identifier	⊆lose		
The o	lata was s	successfully saved.				
Ide	ntifier Type	SSN	Name:	Benjamin Jones		
	Identifier	950 00 5550	Date of Birth:	07/08/1980		No Photo Available
	Identiliei	. 000-09-000	Date of Bitti.	07/00/1500	(((((()))))))))))))))))))))))))))))))))	

💽 DBI	DS Worksta	tion - FOR OFFIG	IAL USE O	NLY		
⊻iew	<u>R</u> egister	<u>A</u> dministration	Reports	Application		
New	ldentifier					
1	<u>S</u> ave	Cano	el			
		Γ	* Requ	uired Fields		
			*lder	ntifier Type:	State ID 🗸	
				Issuer:	California 💌	
				*Value:	22345678	
				ls Primary:		
			I	ssue Date:	07/08/2007 (MM/DD/YYYY)	
			Expir	ation Date:	07/08/2017 (MM/DD/YYYY)	

Φιγυρε 3. New Identifier Screen



	DBI	DS Workstat	ion - FOR OFFI	CIAL USE C	INLY								
	⊻iew	<u>R</u> egister	<u>A</u> dministration	Reports	Applicat	ion							
	Conta	act Informa	tion										
:	Α	dd Addr <u>e</u> ss	Add Pl	none	9	lose							
	lde	ntifier Type:	SSN				Name:	Benjamin Jo	nes			1	
		ldentifier:	850-09-5556			Date	of Birth:	07/08/1980		(MM/DD/	(YYYY)		No Photo Available
	P	erson Data	Contacts Org	anizations	Status	Biometrics	Credentia	als Permissions	Security Profile	Roles	Vehicles	Access Rosters	
	Ad	dresses of	Current Pers	on:									
	Ad	dress Type	Address 1		Addre	iss 2	City	St	ate	Zip Code	Zip Exte	nsioni Country	
	БР	ono Numb											
			Discus Numb										
	Pr	ione i ype		ber									

💮 DBID	95 Worksta	tion - FOR OFFIC	IAL USE C	INLY	
⊻iew	<u>R</u> egister	<u>A</u> dministration	Reports	Application	
Add A	Address				
	<u>S</u> ave	Cano	el		
			* Req	uired Fields	
			*Add	łress Type:	Home
			7	Address 1:	1855 Washington Street
				Address 2:	
				*City:	Santa Cruz
				*State:	California
				*Zip Code:	95062
			Zip	Extension:	
				*Country:	United States
			Zip	Extension: *Country:	United States

Φιγυρε 5. Add Address Screen

Φιγυρε 6. Add Phone Screen

🌑 DBID	S Worksta	tion - FOR OFFIC	IAL USE O	INLY		
⊻iew	<u>R</u> egister	<u>A</u> dministration	Reports	Application		
Add F	hone					
1	<u>S</u> ave	Canc	el			
				* Required Fields		
				*Phone Type:	Home	
				*Phone Number:	(831) 123-4567	

DBID	5 Workstat	ion - FOR OFFI	CIAL USE O	NLY								
вw	<u>R</u> egister	<u>A</u> dministration	Reports	Applicat	tion							
onta	ct Informa	tion										
Add	l Addr <u>e</u> ss	Add Ph	ione	Updal	te Phone	Dele	te Phone	⊆lose				
ie da	nta was su	iccessfully sa	ived.									
ldent	tifier Type:	SSN			_	Name:	Benjamin	Jones				
	Identifier:	850-09-5556			Date	of Birth:	07/08/1980		(MM/DD/	YYYY		No Photo Available
		000-00-0000							·····	,		
Per	rson Data	Contacts Org	anizations	Status	Biometrics	Credential	s Permission	ns Security Profi	le Roles	Vehicles Ac	cess Rosters	
Add	resses of	Current Pers	on:									
Addr	ess Type	Address 1		Addre	ess 2	City		State	Zip Code	Zip Extensio	ni Country	
Hom	e	1855 Washingt	on Street			Santa Cru	IZ	California	95062		United Sta	ites
Dha	na Numb											
Pho	ne Numb	ers:		_								
Pho	ne Type	Phone Numb	ber	_								
Hom	e	(831) 123-45	57									

 $\Phi_{ij} v \rho \epsilon$ 7. Contact Information Screen with Registrant's Phone Number Added

Φιγυρε 8. Biometrics Screen

DBIDS Workstal	tion - FOR OFFIC	IAL USE (DNLY							
/iew <u>R</u> egister	<u>A</u> dministration	Reports	Application	1						
iometrics										
Add Ph <u>o</u> to	⊆lose									
11 VC T	CON			N Contraction	Daniamin L					-
Identifier Type:	5514			Name:	benjanin Jo	Jiles				No Photo
Identifier:	850-09-5556			Date of Birth:	07/08/1980		(MM/DD	/YYYY)		Available
Person Data	Contacts Orga	nizations	Status Bior	metrics Credentia	als Permissions	Security Profile	Boles	Vehicles	Access Bosters	_
Biometrics of	Current Perso	on:								
Biometric Type	Capture Ir	ndicator	Capture Date	Item Captured	1					
Photo				Full Face From	ntal					
Fingerprint				Right Thumb						
Fingerprint				Right Index						
Fingerprint				Right Middle						
Fingerprint		1		Right Ring						
Fingerprint				Right Little						
Fingerprint		1		Left Thumb						
Fingerprint		1		Left Index						
Fingerprint		1		Left Middle						
Fingerprint				Left Ring						
Fingerprint	Г	-		l oft Little						

🌄 DBI	DS Worksta	tion - FOR OFFI	IAL USE O	NLY	
⊻iew	<u>R</u> egister	<u>A</u> dministration	Reports	Application	
Phot	tograph Up	date			
	Cap <u>t</u> ure	⊆and	el	_	
					Streaming Data

Φιγυρε 9. Photograph Update Screen



DBIDS Workstatic	on - FOR OFFICIAL U	5E ONLY	
/iew <u>R</u> egister j	Administration Repo	rts Application	
iometrics			
Add <u>F</u> ingerprint	⊆lose		
	CCN		Destantia lana
Identifier Type:	2211		Name: benjamin Jones
ldentifier:	850-09-5556		Date of Birth: 07/08/1980 (MM/DD/YYYY)
Person Data (Contacts Organization	s Status Biometr	ice Credentials Permissions Securitu Profile Boles Vehicles Access Bosters
Biometrics of C	urrent Person:	s status biometr	
Biometric Type	Capture Indicato	Capture Date	Item Captured
Photo		01/07/2011	Full Face Frontal
Fingerprint			Right Thumb
Fingerprint			Right Index
Fingerprint			Right Middle
Fingerprint			Right Ring
Fingerprint			Right Little
Fingerprint			Left Thumb
Fingerprint			Left Index
Fingerprint			Left Middle
Fingerprint			Left Ring
Fingerprint			Left Little



Φιγυρε 11. Update Fingerprint Screen – Ready to Capture

Φιγυρε 12. DBIDS ID Cards Screen

۰) BIDS Workstatio	on - FOR OFF	ICIAL USE (ONLY									
V	ew <u>R</u> egister	<u>A</u> dministration	Reports	Applica	ition								
D	BIDS ID Cards												
1	Issue DBIDS	Card		⊆lose									
Г													
	ldentifier Typ	e: SSN				1	lame: Bei	njamin Jone	s				
l	Identifie	er: 850-09-5	5556			Date of	Birth: 07/	08/1980		(MM/DD/YY	ΥY)		135
Ľ	Person Data	Contacts Or	ganizations	Status	Biometrics	Credentia	s Permissio	ns Security P	ofile Roles	: Vehicles	Access	s Rosters	
	Credentials of	Current Pe	erson:										
L	DoD ID Cards	DBIDS I	D Cards	Visitor	Passes	Non-DoE	ID Cards	Sponsored C	redentials				
	Base Name	DBIDS Cat	egory	ID Card Status	Spons Type	or Sp Na	onsor me	Begin Date	End Date	End Reaso	on		

DBID5 Workstation ·	FOR OFFICIAL USE O	NLY			
<u>V</u> iew <u>R</u> egister <u>A</u> dn	ninistration Reports	Application			
Issue DBIDS Card -	Person Data				
Print DBIDS Card	Cancel				
Front:	Jones, Benjamin Approved Access: Acce	Calegory: Department of Defanse Calegory: None Base Fort Ord beaund: 2011 JAM 10 Expired: ess Årea: FPCON:	Back:	Remark	s: Bigging and the second states government states and the second states government
	Defense Blometric Id	entification System			
Person Data B	iometrics Card Data	Permissions			
* Required Field	ls Information ———		D	amagrav b	Im
*First Nar	me ^r Benjamin			Gender:	Male
Middle Nar	ne:			Height	
*Last Nar	ne: Jones			Weight:	190 🖶 lbs
Su	ffix:			Eve Color:	Brown
*Date of Bi	rth: 07/08/1980	(MM/DD/YYYY)		Hair Color:	Proven
Citizens	nip: United States		•	nall Color.	
	1				



DBIDS Workstation	- FOR OFFICIAL USE	ONLY		
jew <u>R</u> egister <u>A</u> d	ministration Reports	Application		
sue DBIDS Card -	Biometrics			
<u>A</u> dd Photo	<u>O</u> verride Fin	gerprint	Print DBIDS Card	⊆ancel
Front:	No Photo Available Jones, Benjamin Approved Access: A	Calegory: Calegory: Base Base Fort Ord Issued: Desired: Cosess Area: FPCC	Bac	:k:
	Escort Limit: 0 Defense Blometric	Vehicle Limit: 0 Identification System	1	
Person Data B	liometrics Card Da	ta Permissions		
Biometric Type	Capture Indicator	Capture Date	Item Captured	
Photo				
Fingerprint			Right Thumb	
Fingerprint			Right Index	
Fingerprint			Right Middle	
Fingerprint			Right Ring	
Fingerprint			Right Little	
The second state			Latit Thursda	

Φιγυρε 14. Issue DBIDS Card — Biometrics Screen

DBIDS	Workstation	- FOR OFFICIAL USE (DNLY				
⊻iew	<u>R</u> egister <u>A</u> d	ministration Reports	Application				
Issue D	BIDS Card -	Card Data					
Select	Sponsor	Print D <u>B</u> IDS Card	Cancel				
	Front:	Jones, Benjamin Approved Access: Acc Escort Limit: 2 Defense Biometric I	Calegory: None Base Fort Ord Issued: 2011 JAN10 Expired: Cess Area: PPCON:	Back:	Remarks:	Property of the United States Government	
Pers	on Data	Biometrics Car	d Data Permissions				-
Care Pri *Pri	Card Data Print Order of Permissions *Primary: JOINT BASE ABRAMS Secondary: *Category: Conveyance *Sponsor Type: Organization *Sponsor: *Issue Date: 01/10/2011 (MM/DD/YYYY) *Expiration Date: 01/10/2012 (MM/DD/YYYY) *						



OBIDS Workstation - FOR OFFICIAL USE ONLY							
View Register Administration Reports Application							
Register Vehicle - Add Vehicle Information							
Register Vehicle <u>C</u> ancel							
Information Sponsor Insurance							
* Required Fields							
*VIN: A19384N19283T7634							
Vehicle Description	License Plate						
O New . ● Used	*Issuer Type: US State						
*Make: Dodge	*Issuer: California						
*Model: RAM	*Plate Number: 178ZXZ						
*Year: 2009							
*Color: Blue	Decals						
	Safety Decal ID:						
Body Type: Pickup Truck	DoD Decal ID:						

Φιγυρε 16. Register Vehicle – Add Vehicle Information Screen

Φιγυρε 17. Register Vehicle – Add Vehicle Sponsor Screen

OBIDS Workstation - FOR OFFICIAL US	ONLY			
View Register Administration Report	s Application			
Register Vehicle - Add Vehicle Spo	nsor			
Select Person Sponsor	Select Organization Sponsor	Register Vehicle	Cancel	
				_
Information Sponsor Insurance				
Vehicle Sponsor				
	Please select a sponsor	from the buttons above.		
Person Registration Information: -				
*Base: Base Fort	Ord	~		
Owner? 🗖		Remarks	s:	
*Registration Status: Driving Sta	tus	-	<u> </u>	
*Registration Date: /_/	(MM/DD/YYY)			
*Expiration Date: / /				
		l		

	<u>R</u> egister	<u>A</u> dministration	Reports	Application	
1	ch for Veh	icle Sponsor ((Person)		
	<u>S</u> earch	Clea	r	Cancel	
		Identifie	er Type: 🛛		-
			Issuer:		~
		lde	entifier:		
		Date o	f Birth:	_//	(MM/DD/YYYY
		First	Name:		
		Middle	Name:		
		Lact	Name:		

Φιγυρε 18. Search for Vehicle Sponsor (Person) Screen

Φιγυρε 19. Register Vehicle – Add Vehicle Insurance Screen

🐻 DBI	DS Workstal	tion - FOR OFFI	CIAL USE O	NLY CONTRACTOR OF
⊻iew	<u>R</u> egister	<u>A</u> dministration	Reports	Application
Reg	ister Vehicl	e - Add Insur	ance	
R	egister Vehicle	⊆an	cel	
	Information	Sponsor	Insurance	
	* Required	Fields		
	*Comp	oany Name: 🛛	Allstate	
	*Poli	cy Number:	872908475	64
	*Policy Ho	older Name: 🛛	Kurt Cass	idy
	*Expi	ration Date:	12/31/2011	(MM/DD/YYYY)
	Liability	/ Insurance: 🛛 🛚	2	
	Liability	Exp. Date:	12/31/2011	(MM/DD/YYYY)
L				

*Base: BASE FORT ORD *Roster Name: * *Location: * *Roster Status: Approved *Effective Date: 01/10/2013 (MM/DD/YYYY) Expiration Date: /_/	Sponsor Information The sponsor should be provided a Privacy Act Statement for distribution. *Sponsor: Jeremy Arlington *POC Phone:
--	---

Φιγυρε 20. Create Access Roster Screen

Roster Name: Securit; Sponsor: Jerem; POC Phone: (831) 55	y Conference y Arlington 5-6790	Effective Date: 01/10/2013 (MM/DD/YYYY) Expiration Date: 01/12/2013 (MM/DD/YYYY)
Roster Information Event Information *Base: *Roster Name: *Location: *Roster Status: *Effective Date: *Expiration Date: *Termination Reason:	Roster Permissions Roster Persons BASE FORT ORD Security Conference Bldg 7 Conference Room Approved 01/10/2013 (MM/DD/YYYY) 01/12/2013 (MM/DD/YYYY)	Sponsor Information *Sponsor: Jeremy Arlington *POC Phone: (831) 555-6790 Associated Organization (optional) Name: Education Center POC: Mark Davis Phone Number: (831) 293-4589
Remarks -		×

Φιγυρε 21. View Access Roster Screen

View Register Administration Reports Application	
Add Access Roster Person	
Save Review Cancel	
*Required Fields	
*First Name:	Mary
Middle Name:	
*Last Name:	Jones
*Date of Birth:	08/07/1987
*Identifier Type:	Drivers License
*lssuer:	California
*ldentifier:	J89765321
License Plate Issuer Type:	
License Plate Issuer:	
License Plate Number:	
	·
Remarks:	

Φιγυρε 22. Add Access Roster Person Screen