

## Personal Identity Verification

**Instructions:** Homeland Security Presidential Directive (HSPD) 12 requires ATF to issue secure and reliable forms of identification to its personnel. To meet this requirement, a Personnel Security Division (PSD) staff member or Trusted Information Provider (TIP) must conduct a personal identity verification (PIV) check on candidates for ATF employment and service provider positions (*i.e., contractors*). The TIP who is usually an ATF sponsor or point of contact serving as a sponsor, **must review two forms of original, unexpired government-issued identification** in order to verify the candidate's identity and citizenship. When a sponsor is unavailable, any ATF employee or non-ATF personnel (*i.e., PSD vetted contractor, task force officer, or volunteer/intern*) may serve as a TIP.

An individual conducting a PIV check must follow the instructions outlined in PSD's Guidelines for Conducting Personal Identity Verification Checks, which is located on PSD's page found under the Office of Professional Responsibility and Security Operations' link, on the ATF portal. The Guidelines provide information on acceptable forms of identification and steps for completing PIV checks.

Information on each original form of identification presented by the candidate must be reviewed and documented below. Identification documents presented by the candidate must **not** be copied.

### Candidate Information

Full Legal Name	Last Name:	First Name:	Middle Name:	Suffix:
Date of Birth:	Place of Birth ( <i>City, State</i> ):		Country of Birth:	

### Identification Information

Type of Primary Federal/State Identification Reviewed:	Document Number ( <i>If applicable</i> ):	Expiration Date:
Type of Secondary Identification Reviewed:	Document Number ( <i>If applicable</i> ):	Expiration Date:

1. Does the primary Federal or State identification contain a photograph? Yes ☐ No ☐
2. Does the secondary form of identification contain a photograph? Yes ☐ No ☐
3. Do the names on both forms of identification match? Yes ☐ No ☐ (*If no, explain in the Comments section below*)
4. Do the documents appear to be fraudulent? Yes ☐ No ☐ (*If yes, explain in the Comments section below*)

Comments:

Name of TIP:	TIP's E-mail Address:	TIP's Phone Number:	Date of Verification:
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## Privacy Act Statement

This information is provided pursuant to Sections 3 and 7(b) of the Privacy Act of 1974 (5 U.S.C. § 552a(e)(3)):

1. **Authority:** Solicitation of this information is authorized under Executive Orders 13467 and 13764, Homeland Security Presidential Directive 12 (HSPD-12), and the Intelligence Reform and Terrorism Prevention Act of 2004. The Bureau of Alcohol, Tobacco, Firearms, and Explosives (ATF) is empowered to collect this information as part of the personnel security and suitability determination process.
2. **Purpose:** ATF will use the information requested on ATF Form 8620.40 to verify and document the identity and citizenship of candidates for ATF employment and service provider positions. This information supports compliance with HSPD-12 requirements and ensures proper vetting before granting access to ATF information, IT systems, and facilities.
3. **Routine uses:** ATF will use the collected information to determine the level of access to ATF information, IT systems, and facilities. It will become part of the personnel security record and may be disclosed in accordance with the applicable System of Records Notice: Justice/ATF-006—Internal Security Record System. Specifically, information may be disclosed to other Federal agencies, law enforcement entities, or as otherwise authorized by law for personnel security and suitability purposes.
4. **Disclosure:** Providing this information is voluntary. However, failure to supply complete and accurate information may delay or prevent completion of personnel security requirements and processing of access requests for candidates seeking employment or service opportunities with ATF.

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## Paperwork Reduction Act Notice

This request is in accordance with the Paperwork Reduction Act of 1995. The information collected is used by ATF to document the identity and citizenship of candidates for ATF employment and service provider positions. The appropriate ATF office (*Personnel Security Division*) will maintain a copy of this form. It will be used to document the forms of identification presented by the candidate.

The estimated average burden associated with this collection of information is 15 minutes per respondent, depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be addressed to the Report Management Officer, Resource Management Staff, Contracts and Forms Office, Bureau of Alcohol, Tobacco, Firearms and Explosives, 99 New York Avenue, NE., Washington, DC 20226.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information that does not display a currently valid Office of Management and Budget control number.