

Contact Information

Commercial: (520) 538-5482

DSN: 879-5482

[Visitor Website](#)

Visitor Information

All visitors, except for DoD I.D. card holders, should report to the gate at the corner of Reece Road and Route 175 in Odenton and proceed through the Demps Visitor Control Center and the Visitor Entrance (located immediately on the right after turning onto Reece Road). All other gates are for DoD I.D. card holders only. For first-time visitors and those unfamiliar with the Base, the Reece Road Gate is the most direct route to the DISA Headquarters.

DoD I.D. Card Holders

Guests with the following IDs can proceed through the Gates (no decal required):

- Common Access Card (CAC)
- Retired Military ID
- Active Duty ID
- Retired Civil Service
- Dependent ID

Direction- Baltimore MD

Go to MD-295 S towards WASHINGTON to US 175 EAST. Follow 175 EAST until you come to the Reece Road intersection (there is a traffic light). Turn right at the traffic light onto Reece road, and proceed to the Main Gate

Directions From South-Washington D.C.

Go to MD-295 N (BW-Parkway) towards BALTIMORE to US 175 EAST. Follow 175 EAST until you come to the Reece Road intersection (there is a traffic light). Turn right at the traffic light onto Reece road, and proceed to the Main Gate

Directions from Virginia

Go to 495 to 95 N towards BALTIMORE to US 32 to Exit 6, US 175 WEST, at light turn left. Follow 175 WEST until you come to the Reece Road intersection (there is a traffic light). Turn left at the traffic light onto Reece road, and proceed to the Main Gate.

VAR-Visitor Access Request Form

Must be completed and submitted by sponsor two weeks before visit to base.

JITC FORT MEADE

Fort George G. Meade Installation Access Request

Applicant's Full Name (Last, First, Middle Name)		Height	Weight	Eye Color	Hair Color
Social Security Number	Sex	Driver's License Number and St.		Date of Birth	
	Male <input type="checkbox"/> Female <input type="checkbox"/>				
Race	Ethnicity	Citizenship		Status	
<input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> Unknown	<input type="checkbox"/> Hispanic <input type="checkbox"/> Not of Hispanic Origin <input type="checkbox"/> Unknown	<input type="checkbox"/> U.S. <input type="checkbox"/> Other Specify Below		<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced	
<input type="checkbox"/> Permanent Resident Card <input type="checkbox"/> Workers Authorization Card <input type="checkbox"/> Naturalization Certificate <input type="checkbox"/> Non U.S. Passport <input type="checkbox"/> N/A					
Card/Certificate/Passport Number:					
Home Address:					
Best Phone Number:			Work Phone Number:		
Company Name and Full Address:					
SPONSOR INFORMATION					
Sponsoring Organization/Unit:					
Sponsors Name(Print):		Sponsors Rank:	Sponsors Status:	Contract Number:	
Sponsors Work Phone Number:		Sponsors Home Number:		Expiration Date (MM-DD-YYYY)	
Sponsors Signature: _____		Signature Date:			
Reason access is needed? If more space is needed please continue on additional paper. (Attach any important documents)					
FOR INTERNAL USE ONLY					
Notes:					
<u>Directorate of Emergency Services, NCIC Operator</u> <input type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared _____				Date of NCIC Check: (MM-DDYYYY)	
Installation Access Control Officer (DES STAMP)				Date Processed: (MM-DD-YYYY)	
<input type="checkbox"/> Access Approved <input type="checkbox"/> Access Denied _____					

JITC FORT MEADE

Officer)	(Signature of Access Control
<input type="checkbox"/> On gate Vetted List/AIE Database Badge: <input type="checkbox"/> One day Pass <input type="checkbox"/> Badge Expiration Date _____	Date Issued: (MM-DD-YYYY)
<p> <u>Data Required By the Privacy Act of 1974 Authority</u> 5 U.S.C. 301, Dept. Regulations 10 U.S.C. 3013 <u>Principal Purpose(s):</u> In addition to those disclosures generally under 5 U.S.C. 552a(b) of the Privacy Act, this information contained therein may be disclosed outside DOD as a routine use pursuant to 5 U.S.C. 552a(b)(3), AR 340-21, Para 3-2 <u>Disclosure:</u> VOLUNTARY, individual may disclose his or her personal information; however, failure to provide your SSN and personal data may delay or preclude access to the installation. (Authorized under AR 190-45, AR 190-5, MDW requirements, and U.S.C. 3013) </p>	
<input type="checkbox"/> GOVERNMENT <input type="checkbox"/> RESIDENT <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> VISITOR <input type="checkbox"/> OTHER _____	
FGGM FORM 191-001-R-E	