

DEPARTMENT OF HOMELAND SECURITY U.S. Customs and Border Protection

OMB APPROVAL NO: 1651-0008 EXPIRATION DATE: 11/30/2024

APPLICATION FOR IDENTIFICATION CARD

19 U.S.C. 66, 1551, 1555, 1565, 1624, 1641; 19 CFR 112.42, 118, 122.182, 146.6

1. Type Of Activity	Requiring Identifica	ition Card	ŕ	,		2. Date	
Cartman/	Broker's CBP Employee Secu	☐ Warehouse Officer ☐ C	Container Stati Employee		S OPR		
3. Name (Last, Fir	rst,MI)	4. Social Secu	urity Number	5. Citizenship	Lawfu	ll Permanent Resident	
				Resident Alien Number			
6. List Any Other I	Names You Have E	ver Been Known By (Nicknames, alia	ses, etc.)			7. Date Of Birth	
8. Home Addres	SS (Number, Street, C	ity, State, and ZIP Code) 9. Name And	d Address Of	f Present Employer			
10. If you checked	d CBP Security Area	a Identification in block 1. Describe the	e employee's j	ob description, responsibil	ities and zone red	quested"	
11. General Com	ments						
12 Home Phone	Number		1				
12. Home Phone Number 13. Mobile Phone Number			14. Email Address				
15. Business Pho	one Number		16. Employer Email Address				
17. Place Of Birth	n (City, County, Stat	e, and Country)	18. Height 19. Weight 20. Color Hair 21. Color Eyes				
			22. Visible S	cars Or Marks		-	
23. U.S. Coast Gu	ard Port Security Ca	ard Number	24. U.S. Merchant Marine Card Number				
25. Have You Ever	Applied For Card I	n Item 23 Or Item 24?	26. Has App	olication For Card In Item 2	23 Or 24 Been De	enied?	
YES	ПNO	(Skip Items 26 and 27)	YES (If Yes, explain in Item 27) NO (Skip Item 27)				
27. Explanation Of	Application Denial						
28 List All Pasida	ances During The La	ast 5 Years (List in reverse order, beg	inning with the	nresent address)			
	TES	List in reverse order, beginner	mining with the	present address)			
From	To	Number and Street		City	State	Country	
1 10111	PRESENT						
	FILISLINI						
20. 115 7	- Camead III 71 - A	and Comings Of The U.C.C.	I				
29. Have You Ever		ned Services Of The U.S.? NO (Skip Items 30-34)		30. Branch Of Service			
31. Dates Of Serv	rice		;	32. Serial Number 33. Type Of Discharge		Discharge	
34 If Discharge W	Vas Other Than Hor	norable, Explain In Full Detail					
Discharge V							

35. Have You Eve	er Applied For An Identificati	on Card With U.S. Cus	toms And Border Prote	ection? YES	(If Yes, explain details) NO
36. PREVIOUS EN	 MPLOYMENT LIST IN CF	RONOLOGICAL ORD	ER, GIVING EARLIES	T EMPLOYMENT FIRST (La	ast 10 Years)
	DATES		EMPLOYER ADDRES	EMPLOYER NAME AND YOUR	
From	То			OCCUPATION	
violations, you may	r Been Convicted Of Any Cr v exclude any items which or f All Convictions (Federal, S	ccurred before your 16	<i>th birthday)</i> In This Coเ	gration Violations <i>(Other thar</i> intry Or Elsewhere?	n traffic YES (If YES, explain No in Item 38.)
Date	Place		Charge	Court	Final Disposition
39. Do You Now U	Ise Or Have You Ever Used	Narcotic Drugs?		ES (If YES, explain NO below.)	40. Attach a Copy Of Any Of The Listed Acceptable Forms Of Identification Here
41. CERTIFICA	are true, complete,	e statements made in the and correct to the best ef, and are made in goo	of my	Date	

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Paperwork Reduction Act Notice: The Paperwork Reduction Act says we must tell you why we are collecting this information, how we will use it, and whether you have to give it to us. We ask for this information to carry out U.S. Customs and Border Protection laws of the United States. This form is used by licensed cartmen or lightermen or their employees as an application to apply for a CBP identification card and is required to obtain or retain a benefit. The estimated average burden associated with this collection of information is 17 minutes per respondent or recordkeeper depending on individual circumstances. The valid OMB Control Number for this Information Collection is 1651-0008.

CBP Form 3078/OMB No. 1651-0008 DHS Privacy Act Statement

Pursuant to 5 U.S.C. § 552a(e)(3), this Privacy Act Statement serves to inform you of why DHS is requesting the information on this form.

A. AUTHORITY:

Collection of the information solicited on the CBP Form 3078/OMB No. 1651-0008, is authorized by 5 U.S.C. 301; 19 U.S.C. § 1551, 1565, 1624, 1641; and 19 CFR§ 112.42.

B. PURPOSE:

The primary purpose for soliciting this information is to enable CBP to conduct a background investigation and thereby determine whether the applicant meets the criteria required for the issuance of an identification card. Additionally, CBP solicits information through this form to enable CBP/Office of Personal Responsibility (OPR) to conduct a background investigation and thereby determine whether a visitor or contractor may be cleared to enter a CBP Port of Entry (POE).

C. ROUTINE USES:

CBP may provide information collected and contained in the applicant's file to those employees of CBP who have a need for the records in the performance of their duties. CBP may also use this information, when deemed appropriate, in a proceeding to revoke or suspend the identification card or CBP POE.

The information solicited on the CBP Form 3078/OMB No. 1651-0008 may be shared externally as a "routine use" to other government agencies to assist the Department of Homeland Security in investigating and assessing an applicant's eligibility for an identification card. A complete list of the routine uses can be found in the system of records notice associated with this form; DHS/ALL-023 Department of Homeland Security Personnel Security Management, October 13, 2020, 85 FR 64511, and DHS/ALL-026 Department of Homeland Security Personal Identity Verification Management System, June 25, 2009, 74 FR 30301. The Department's full list of system of records notices can be found on the Department's website at http://www.dhs.gov/system-records-notices-sorns.

D. CONSEQUENCES OF FAILURE TO PROVIDE INFORMATION:

Providing this information is not legally required and is voluntary. However, failure to do so may result in CBP's inability to conduct the background investigation required to issue the identification card or to grant clearance to CBP POE.

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