

FORT BLISS, TEXAS

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OFFICE OF THE PROVOST MARSHAL

&

DIRECTORATE OF EMERGENCY  
SERVICES

Vehicle Registration Section  
In processing  
Fact Sheet

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STATE REGISTRATION (ALL VEHICLES): Must possess a valid certificate of registration as required by the state in which the vehicle is registered. Vehicles with overseas plates or temporary registration will be issued temporary post registration for a period of 30 days. The vehicle being registered must be in the name of the person registering that vehicle. Power of attorney or notarized statements are the only exception to this policy. OCONUS registered vehicles will have 30 days from the arrival of the vehicle to obtain a US vehicle registration.

CURRENT INSURANCE (ALL VEHICLES): Proof of current insurance that meets the minimum requirements of the automobile insurance laws or regulations of the state must be provided. The vehicle being registered, as well as the person's name registering the vehicle, must be noted on the insurance card. Out of state insured vehicles must meet Texas minimum insurance standards.

DRIVER'S LICENSE (ALL VEHICLES): A VALID DRIVER'S LICENSE MUST BE PROVIDED. Any U.S. state issued license will be accepted. Soldiers returning from overseas will comply with Texas licensing requirements or obtain a license in their state within 30 days of arrival.

MILITARY ID CARD (ALL VEHICLES): Active/Reserve/NG duty, retired military, and Civil Service employee identification cards are the only acceptable forms of ID. (Veterans affairs cards, security badges, WBAMC badges, and retired civil service will not be accepted for the purpose of vehicle registration).

TEXAS EMISSIONS AND SAFETY INSPECTION REPORT (ALL VEHICLES): All active duty personnel assigned and civilian personnel who work on Fort Bliss will provide proof of a Texas emissions test regardless of whether or not the registering state requires emissions testing. Personnel on TDY status for less than 60 days are not required to obtain an emissions test. (Fort Bliss includes the main cantonment, WBAMC, BAAF, and all training areas.) Vehicles older than 24 years; diesel, motorcycles and German vehicles purchased in Germany owned by German military personnel who will not be assigned here for a period exceeding 1 year, and retirees who live outside of El Paso County are exempt from this policy. Vehicles less than two years old at the time of registration and foreign vehicles not outfitted with the proper electric harness used to test these vehicles are also exempt from this policy. Emissions test are performed at local service stations or at the Auto Crafts Center located at BLDG 820 Marshal Rd., 568-7280.

NOTE: Compliance with emissions testing is not optional. Fort Bliss is situated in El Paso County, which is mandated by Texas State law and the Federal Clean Air Act, to comply with this standard. Federal installations are not exempt from participation in this program.

TEXAS SAFETY INSPECTION REPORT (ALL VEHICLES): Vehicles registered in the state of Texas must provide a copy of a state safety inspection report (certificate). Vehicles registered in states that do not mandate a safety inspection will require a Texas Safety Inspection to be registered and operated on Fort Bliss. Motorcycles will also require a safety inspection if not provided in the state of registration. A safety inspection report from any state for both vehicles and motorcycles will be accepted. All vehicles regardless of age must provide proof of a safety inspection report.

**Soldiers will wear all safety riding gear IAW AR 385-55, update 1, Prevention of Motor Vehicle Accidents, while riding on or off the installation.**

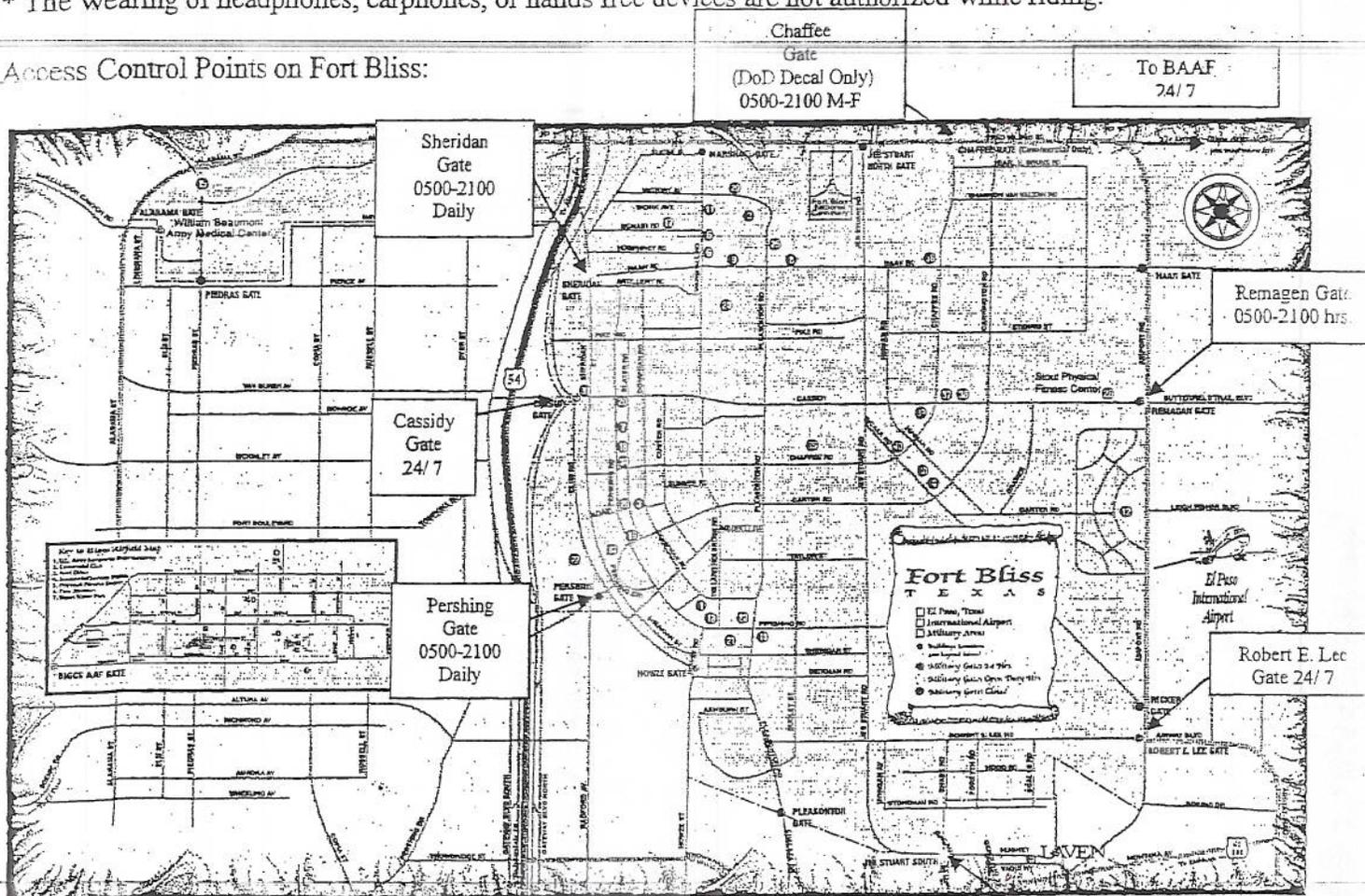
**The specified safety gear includes:**

- a properly fastened under the chin, approved helmet that meets Department of Transportation (DOT) standards.
- safety glasses or goggles while driving or riding as a passenger on a motorcycle. A motorcycle or moped windshield fairing is not considered proper eye protection.
- full-finger gloves
- long-legged pants
- long sleeve shirt or jacket
- leather boot or over the ankle shoes
- high visibility garment (bright colors for day and reflective for night) If worn, PT Belt must be over any backpacks, camelbacks or other items worn on the back and visible to drivers behind and in front of you.

\* Motorcycles must have two rearview mirrors (one on each side) and maintain headlights on at all times

\* The wearing of headphones, earphones, or hands free devices are not authorized while riding.

Access Control Points on Fort Bliss:



(For an original map see the Welcome Center)

\* ACP hours subject to unannounced closures with FP Con levels

**PASS OFFICE TELEPHONE NUMBERS**

Cassidy: 568-6047

Robert E Lee: 568-3215

Biggs: 744-2000

Chaffee (Commercial/ Contractors): 568-6853

DECALS: Decals may be displayed on the top center portion or lower left hand corner of the windshield. DoD form 2220, 1 Nov 79, decals are an accountable item and must be removed (in any condition) upon ETS, replacement of windshield or resale of vehicle. Soldiers arriving with vehicles that are registered on an installation other than Fort Bliss will be required to register on Fort Bliss within 30 days of arrival to Fort Bliss. DoD stickers are to remain on your vehicles and the Fort Bliss decal will be issued to replace your former duty station.

**BICYCLE REGISTRATION:** All bicycles must be registered on the installation within 72 hours of arrival or acquisition. Motored vehicles under 50ccs may be registered as bicycles. This may include motorized scooters, mopeds, golf carts or ATVs) Motorcycles or ATVs over 50ccs will be treated and registered IAW motorcycle registration requirements.

**MOPED REGISTRATION: USAADACEN Reg 190-5, 1 April 1993, IS CHANGED AS FOLLOWS:**

**4-2.1 REGISTRATION AND OPERATION OF MOPEDS:**

1. A moped is defined as a motor-driven cycle that cannot attain a speed on one mile or more than 30 miles per hour and the engine of which:

- a. cannot produce more than two-break horsepower; and
- b. if an internal combustion engine, has a piston displacement of 50 cubic centimeters or less and connects to a power drive system that does require the operator to shift gears.

2. A moped will be registered with the Fort Bliss Vehicle Registration Office in building 505 in order for it to be legally operated on an installation.

3. Requirements for registration: Valid Registration with license plate, insurance (20/40/15), and a valid driver's license. A motorcycle Defensive Driving Card (MDDC) is not required. The moped will be registered in the vehicle registration database. Registration decals will be provided for the owner to place on the moped.

**MOTORCYCLE REGISTRATION:** Motorcycles will be registered by the Vehicle Registration Office or a pass office.

**Requirements to register a motorcycle are:**

- valid driver's license bearing a motorcycle endorsement (out of state driver's licenses not meeting this requirement will not be accepted)
  - Basic Motorcycle Safety Foundation Card or equivalent Motorcycle Defensive Driving Course Card (eligibility must be determined by the installation Safety Officer)
  - current state registration
  - current Safety Inspection report
  - Current insurance meeting minimum Texas liability standards
- \*Riders are required to carry all listed documents while riding on the installation.

**\*Riders that are not in possession of a Basic MSF Course Card or a Basic MDDC equivalent card will only be authorized a one day vehicle pass for the purpose of transporting the motorcycle to their billets or on post quarters and may return to the Vehicle Registration Office or a Pass Office for a day pass prior to the date of the scheduled Basic MSF Course. Written documentation with the class date on will be required as proof of registration. Upon successful completion of the Basic MSF Course, personnel will return for the DoD Form 2220 decal. Basic MSF card will be required.**

For registration purposes, Soldiers/ Civil Service employees who do not have the Basic MSF Course Card in their possession ~~may present the Advanced Safety Foundation Course card~~ in lieu of the Basic MSF card.

Soldiers/ Civil Service Personnel assigned, or TDY, on Fort Bliss may register for a Basic MSF Course by contacting the Installation Safety Office at (915) 568-7772.

# Weapons Registration Form

(USAADACEN FB 27-5 & FB REG 200-3)

## REGISTRANT INFORMATION: (Please Print Legibly)

SSN: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MIDDLE NAME: \_\_\_\_\_  
 LAST NAME: \_\_\_\_\_ RANK/ GRADE: \_\_\_\_\_  
 UNIT/ ORGANIZATION: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_  
 HOME ADDRESS: \_\_\_\_\_ APT: \_\_\_\_\_

TELEPHONE NUMBER: ( ) \_\_\_\_\_ EYE COLOR: \_\_\_\_\_ HAIR COLOR: \_\_\_\_\_  
 DOB: \_\_\_\_\_ (YEAR/ MM/ DD) HT: \_\_\_\_\_

## SPONSOR NAME (If Different From Above):

SSN: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MIDDLE NAME: \_\_\_\_\_  
 LAST NAME: \_\_\_\_\_ RANK/ GRADE: \_\_\_\_\_  
 UNIT/ ORGANIZATION: \_\_\_\_\_

UNIT TEL. NUMBER: ( ) \_\_\_\_\_

## DESCRIPTION OF FIREARM/ WEAPON(S):

SERIAL #: \_\_\_\_\_ TYPE (PISTOL, RIFLE, ETC.): \_\_\_\_\_ ACTION (Auto, Semi, Revolver...) \_\_\_\_\_ MAKE: \_\_\_\_\_  
 CALIBER: \_\_\_\_\_ FINISH: \_\_\_\_\_ LOCATION STORED: \_\_\_\_\_ MODEL: \_\_\_\_\_  
 OVERALL LENGTH: \_\_\_\_\_ BARREL: \_\_\_\_\_  
 SERIAL #: \_\_\_\_\_ TYPE (PISTOL, RIFLE, ETC.): \_\_\_\_\_ ACTION (Auto, Semi, Revolver...) \_\_\_\_\_ MAKE: \_\_\_\_\_  
 CALIBER: \_\_\_\_\_ FINISH: \_\_\_\_\_ LOCATION STORED: \_\_\_\_\_ MODEL: \_\_\_\_\_  
 OVERALL LENGTH: \_\_\_\_\_ BARREL: \_\_\_\_\_  
 SERIAL #: \_\_\_\_\_ TYPE (PISTOL, RIFLE, ETC.): \_\_\_\_\_ ACTION (Auto, Semi, Revolver...) \_\_\_\_\_ MAKE: \_\_\_\_\_  
 CALIBER: \_\_\_\_\_ FINISH: \_\_\_\_\_ LOCATION STORED: \_\_\_\_\_ MODEL: \_\_\_\_\_  
 OVERALL LENGTH: \_\_\_\_\_ BARREL: \_\_\_\_\_

### Weapons Registration Form

(USA ADACEN FB 27-5 & FB REG 200-3)

REGISTRANT INFORMATION: (Please Print Legibly)

SSN: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MIDDLE NAME: \_\_\_\_\_

UNIT/ ORGANIZATION: \_\_\_\_\_ RANK/ GRADE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ APT: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

TELEPHONE NUMBER: ( ) \_\_\_\_\_

DOB: \_\_\_\_\_ (YEAR/ MM/ DD) HT: \_\_\_\_\_ " EYE COLOR: \_\_\_\_\_ HAIR COLOR: \_\_\_\_\_

SPONSOR NAME (If Different From Above): \_\_\_\_\_

SSN: \_\_\_\_\_

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MIDDLE NAME: \_\_\_\_\_

UNIT/ ORGANIZATION: \_\_\_\_\_ RANK/ GRADE: \_\_\_\_\_

UNIT TEL. NUMBER: ( ) \_\_\_\_\_

DESCRIPTION OF FIREARM/ WEAPON(S): \_\_\_\_\_

SERIAL #: \_\_\_\_\_ TYPE (PISTOL, RIFLE, ETC.): \_\_\_\_\_ ACTION (Auto, Semi, Revolver...) \_\_\_\_\_ MAKE: \_\_\_\_\_

CALIBER: \_\_\_\_\_ FINISH: \_\_\_\_\_ LOCATION STORED: \_\_\_\_\_ MODEL: \_\_\_\_\_

OVERALL LENGTH: \_\_\_\_\_ BARREL: \_\_\_\_\_

SERIAL #: \_\_\_\_\_ TYPE (PISTOL, RIFLE, ETC.): \_\_\_\_\_ ACTION (Auto, Semi, Revolver...) \_\_\_\_\_ MAKE: \_\_\_\_\_

CALIBER: \_\_\_\_\_ FINISH: \_\_\_\_\_ LOCATION STORED: \_\_\_\_\_ MODEL: \_\_\_\_\_

OVERALL LENGTH: \_\_\_\_\_ BARREL: \_\_\_\_\_

SERIAL #: \_\_\_\_\_ TYPE (PISTOL, RIFLE, ETC.): \_\_\_\_\_ ACTION (Auto, Semi, Revolver...) \_\_\_\_\_ MAKE: \_\_\_\_\_

CALIBER: \_\_\_\_\_ FINISH: \_\_\_\_\_ LOCATION STORED: \_\_\_\_\_ MODEL: \_\_\_\_\_

OVERALL LENGTH: \_\_\_\_\_ BARREL: \_\_\_\_\_

# Weapons Registration Form

(USAADACEN FB 27-5 & FB REG 200-3)

REGISTRANT INFORMATION: (Please Print Legibly)

SSN: \_\_\_\_\_

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MIDDLE NAME: \_\_\_\_\_

UNIT/ ORGANIZATION: \_\_\_\_\_ RANK/ GRADE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ APT: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

TELEPHONE NUMBER: ( ) \_\_\_\_\_

DOB: \_\_\_\_\_ (YEAR/ MM/ DD) HT: \_\_\_\_\_ " \_\_\_\_\_ EYE COLOR: \_\_\_\_\_ HAIR COLOR: \_\_\_\_\_

SPONSOR NAME (If Different From Above): \_\_\_\_\_

SSN: \_\_\_\_\_

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MIDDLE NAME: \_\_\_\_\_

UNIT/ ORGANIZATION: \_\_\_\_\_ RANK/ GRADE: \_\_\_\_\_

UNIT TEL. NUMBER: ( ) \_\_\_\_\_

DESCRIPTION OF FIREARM/ WEAPON(S): \_\_\_\_\_

SERIAL #: \_\_\_\_\_ TYPE (PISTOL, RIFLE, ETC.): \_\_\_\_\_ ACTION (Auto, Semi, Revolver...) \_\_\_\_\_ MAKE: \_\_\_\_\_

CALIBER: \_\_\_\_\_ FINISH: \_\_\_\_\_ LOCATION STORED: \_\_\_\_\_ MODEL: \_\_\_\_\_

OVERALL LENGTH: \_\_\_\_\_ BARREL: \_\_\_\_\_

SERIAL #: \_\_\_\_\_ TYPE (PISTOL, RIFLE, ETC.): \_\_\_\_\_ ACTION (Auto, Semi, Revolver...) \_\_\_\_\_ MAKE: \_\_\_\_\_

CALIBER: \_\_\_\_\_ FINISH: \_\_\_\_\_ LOCATION STORED: \_\_\_\_\_ MODEL: \_\_\_\_\_

OVERALL LENGTH: \_\_\_\_\_ BARREL: \_\_\_\_\_

SERIAL #: \_\_\_\_\_ TYPE (PISTOL, RIFLE, ETC.): \_\_\_\_\_ ACTION (Auto, Semi, Revolver...) \_\_\_\_\_ MAKE: \_\_\_\_\_

CALIBER: \_\_\_\_\_ FINISH: \_\_\_\_\_ LOCATION STORED: \_\_\_\_\_ MODEL: \_\_\_\_\_

OVERALL LENGTH: \_\_\_\_\_ BARREL: \_\_\_\_\_

Fort Bliss Bicycle Registration Form

SSN: \_\_\_\_\_ LName: \_\_\_\_\_

<u>Bicycle Information</u> #1	Make: _____
Decal #: _____	Serial#: _____
Type: _____ Men's/Ladies/Childs/Custom/Handicap	Style: > _____ Circle One: Mountain; One Wheel 10SP; Two Wheel 10 SP; Two Wheel 18 SP; Two Wheel 21 SP; UNK
Model: _____	Color: _____

<u>Bicycle Information</u> #2	Make: _____
Decal #: _____	Serial#: _____
Type: _____ Men's/Ladies/Childs/Custom/Handicap	Style: > _____ Circle One: Mountain; One Wheel 10SP; Two Wheel 10 SP; Two Wheel 18 SP; Two Wheel 21 SP; UNK
Model: _____	Color: _____

<u>Bicycle Information</u> #3	Make: _____
Decal #: _____	Serial#: _____
Type: _____ Men's/Ladies/Childs/Custom/Handicap	Style: > _____ Circle One: Mountain; One Wheel 10SP; Two Wheel 10 SP; Two Wheel 18 SP; Two Wheel 21 SP; UNK
Model: _____	Color: _____

<u>Bicycle Information</u> #4	Make: _____
Decal #: _____	Serial#: _____
Type: _____ Men's/Ladies/Childs/Custom/Handicap	Style: > _____ Circle One: Mountain; One Wheel 10SP; Two Wheel 10 SP; Two Wheel 18 SP; Two Wheel 21 SP; UNK
Model: _____	Color: _____

Fort Bliss Bicycle Registration Form

SSN: \_\_\_\_\_ LName: \_\_\_\_\_

<u>Bicycle Information</u> #1	Make: _____
Decal #: _____	Serial#: _____
Type: _____ Men's/Ladies/Childs/Custom/Handicap	Style: > <u>Circle One: Mountain; One Wheel 10SP; Two Wheel 10 SP; Two Wheel 18 SP; Two Wheel 21 SP; UNK</u>
Model: _____	Color: _____

<u>Bicycle Information</u> #2	Make: _____
Decal #: _____	Serial#: _____
Type: _____ Men's/Ladies/Childs/Custom/Handicap	Style: > <u>Circle One: Mountain; One Wheel 10SP; Two Wheel 10 SP; Two Wheel 18 SP; Two Wheel 21 SP; UNK</u>
Model: _____	Color: _____

<u>Bicycle Information</u> #3	Make: _____
Decal #: _____	Serial#: _____
Type: _____ Men's/Ladies/Childs/Custom/Handicap	Style: > <u>Circle One: Mountain; One Wheel 10SP; Two Wheel 10 SP; Two Wheel 18 SP; Two Wheel 21 SP; UNK</u>
Model: _____	Color: _____

<u>Bicycle Information</u> #4	Make: _____
Decal #: _____	Serial#: _____
Type: _____ Men's/Ladies/Childs/Custom/Handicap	Style: > <u>Circle One: Mountain; One Wheel 10SP; Two Wheel 10 SP; Two Wheel 18 SP; Two Wheel 21 SP; UNK</u>
Model: _____	Color: _____

Fort Bliss Bicycle Registration Form

SSN: \_\_\_\_\_ LName: \_\_\_\_\_

<u>Bicycle Information</u> #1	Make: _____
Decal #: _____	Serial#: _____
Type: _____ Men's/Ladies/Childs/Custom/Handicap	Style: > _____ Circle One: Mountain; One Wheel 10SP; Two Wheel 10 SP; Two Wheel 18 SP; Two Wheel 21 SP; UNK
Model: _____	Color: _____

<u>Bicycle Information</u> #2	Make: _____
Decal #: _____	Serial#: _____
Type: _____ Men's/Ladies/Childs/Custom/Handicap	Style: > _____ Circle One: Mountain; One Wheel 10SP; Two Wheel 10 SP; Two Wheel 18 SP; Two Wheel 21 SP; UNK
Model: _____	Color: _____

<u>Bicycle Information</u> #3	Make: _____
Decal #: _____	Serial#: _____
Type: _____ Men's/Ladies/Childs/Custom/Handicap	Style: > _____ Circle One: Mountain; One Wheel 10SP; Two Wheel 10 SP; Two Wheel 18 SP; Two Wheel 21 SP; UNK
Model: _____	Color: _____

<u>Bicycle Information</u> #4	Make: _____
Decal #: _____	Serial#: _____
Type: _____ Men's/Ladies/Childs/Custom/Handicap	Style: > _____ Circle One: Mountain; One Wheel 10SP; Two Wheel 10 SP; Two Wheel 18 SP; Two Wheel 21 SP; UNK
Model: _____	Color: _____

# DES INPROCESSING DATA SHEET

(AR 190-5 & USAADACENFB Reg. 190-5)

## SPONSOR INFORMATION: (Please print legibly)

SSN	LAST NAME	FIRST NAME	MIDDLE NAME
UNIT	RANK	ARMY/MARINES/AF/NAVY	AGE (DOB) DD/MM/YR
Driver's License #	STATE OF ISSUE		
Gender	Height (Ft. in.)	Weight (lbs.)	Eye Color
			Hair Color
<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/> SEPERATED <input type="checkbox"/> WHITE <input type="checkbox"/> BLACK <input type="checkbox"/> UNKNOWN <input type="checkbox"/> ASIAN <input type="checkbox"/> PACIFIC ISLANDER			

HOME ADDRESS (Local)	CITY	STATE	ZIP	(Area Code) TEL. NUMBER
Do you own a vehicle?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Do you own a motorcycle?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Do you own weapons?	<input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, Are they here with you?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Where are they stored?	<input type="checkbox"/> ON POST <input type="checkbox"/> UNIT ARMS ROOM	<input type="checkbox"/> ROD AND GUN CLUB		
	<input type="checkbox"/> OFF POST (All Soldiers are required to register all personal weapons on the installation)			
Have you deployed in the last 180 days?	<input type="checkbox"/> YES, Combat Related	<input type="checkbox"/> YES, Not Combat Related		
	<input type="checkbox"/> NO			
Have you had any vehicle related incidents in the last 12 months?	<input type="checkbox"/> YES <input type="checkbox"/> COLLISION	<input type="checkbox"/> TICKETS (e.g. DUI; Speeding; No Ins., etc.)		
	<input type="checkbox"/> NO			

## SPOUSE INFORMATION: (If dual military, spouse needs to fill out individual separate form)

SSN	LAST NAME	FIRST NAME	MIDDLE NAME
Driver's License #	STATE OF ISSUE	AGE	(DOB) DD/MM/YR

Do you have children?  YES     NO

### DATA REQUIRED BY THE PRIVACY ACT

**AUTHORITY:** Title 10, United States Code, Section 3012(g)

**PRINCIPAL PURPOSE:** To provide Commanders and law enforcement officials with a means by which information may be accurately identified.

**ROUTINE USES:** Personal information is for statistical use and analysis of vehicle registration requirements. Information serves as a record of vehicle registration IAW AR 190-5 and USAADACENFB Regulation 190-5.

**DISCLOSURE:** Disclosure is voluntary. Failure to disclose the requested information may result in the denial of privileges to operate privately owned vehicles on Fort Bliss.