## U.S. DEPARTMENT OF ENERGY

## REQUEST FOR LOST/STOLEN BADGE REPLACEMENT

## OMB BURDEN DISCLOSURE STATEMENT

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Information, Records, and Resource Management, HR-41, - GTN, Paperwork Reduction Project (1910-1800), U.S. Department of Energy, Washington, DC 20874-1290; and to the Office of Management and Budget (OMB), Paperwork Reduction Project (1910-1800), Washington, DC 20503.

Complete the unshaded sections. Return the completed form to the Forrestal (Room 1G-133) or Germantown Badge Office (Room B-106).

1. Print Name: (Last)		(F	First)	(Middle)
2. Telephone No.:	3. Date		If Contractor, print DOE Sponsor's Name: If DOE Employee, print Supervisors Name:	
5. Routing Symbol:	6. Badge No:			
7. Reason (Check One):	LOST S	TOLEN	Other	
badge was lost/stolen, location when Note: 1. A new badge is issued ten	ere the badge may ha (10) business days af eported lost/stolen is	ave been lo ter this con a violation	st/stolen, att npleted form of Section 49	is received by the Badge Office.
9. Signature		10. DOE	10. DOE Sponsor's or Supervisor's Signature (from Section 4)	
FOR BADGE OFFICE USE ONLY				
11. Approved by (Print Name):	12. Signature:	12. Signature:		13. Date:
14. Re-badge on/after this date:	15. Replaceme	15. Replacement Badge Is		16. Badge Number: