



**DEPARTMENT OF THE ARMY**  
U.S. ARMY INSTALLATION MANAGEMENT COMMAND  
HEADQUARTERS, U.S. ARMY GARRISON, FORT BUCHANAN  
390 DOUBLE EAGLE AVENUE, SUITE 300  
FORT BUCHANAN, PUERTO RICO 00934-4616

IMBC-ZA

APR 11 2018

**MEMORANDUM FOR ALL PERSONNEL ASSIGNED TO OR UNDER THE  
OPERATIONAL CONTROL OF THE UNITED STATES ARMY GARRISON (USAG)  
FORT BUCHANAN**

**SUBJECT: Command Policy No. 01, Commander's Open Door**

1. In accordance with AR 600-20, Army Command Policy, dated 6 November 2014, the most effective means for solving problems faced by Soldiers and employees is open communication using the chain of command. Therefore, I encourage all personnel to use this highly effective tool to resolve issues at the lowest possible level. On occasion, a Soldier or employee may believe it is necessary to talk directly to me about those few complex problems, which because of sensitivity or magnitude, cannot be resolved through the chain of command and other conventional means. It is my policy to be available to discuss those matters with the person concerned.
2. If any person wishes to speak with me directly, he or she should call my Administrative Assistant at 787-707-3440 to schedule an appointment. I will make myself available at the earliest convenient time, consistent with operational requirements, for a meeting.
3. I expect leaders to inform personnel of this policy and to fully support it. Leaders are responsible for the prompt and appropriate resolution of minor problems at the lowest level.
4. This policy may not be used to circumvent established administrative procedures that are available to resolve employee and Soldier grievances, complaints, problems, and any other similar issues.
5. As a matter of courtesy, I encourage, but do not require, all Soldiers desiring to see me to first contact my Command Sergeant Major at 787-707-3782 and all Civilian Personnel to first contact my Deputy to the Garrison Commander at 787-707-3240. These notifications are for courtesy and possible assistance in resolving the issue; however are not a requirement prior to scheduling an appointment.

  
GUY D. BASS  
Colonel, AV  
Commanding

IMBC-ZA

SUBJECT: Command Policy No. 40, Access Denial Waiver Process

5. Procedures:

a. Fitness Determination. The designated fitness determination official(s) will review all access denial waiver applications and make a fitness determination recommendation to the approving official.

b. Criteria for Access Denial. Reasons for access denial as a result of derogatory information on NCIC-III are included on enclosure 1.

c. Access Denial Waiver Application Packet. The access denial waiver application packet will instruct the individual to do the following:

(1) Obtain a certified copy of their complete criminal history, which must include all arrests and convictions.

(2) Complete an Installation Access Control Denial Waiver Application and provide the packet to the government sponsor, who will be responsible for submission of the waiver application to the Installation Legal Office (ILO) for consideration by the Garrison Commander (See enclosure 2). All offenses must be listed, along with an explanation why the conduct should not result in denial from entering the Army installation. Other factors that should be addressed by the sponsor/applicant are:

(a) Nature and seriousness of the conduct

(b) Specific circumstances surrounding the conduct

(c) Length of time elapsed since the conduct

(d) The age of the individual at the time of the incident/conduct

(e) Proof of efforts towards rehabilitation

(3) Provide a current physical or e-mail address to enable the Garrison Commander to transmit a copy of his/her waiver request determination.

(4) The government sponsor will review the individual's packet for completeness and determine whether or not to endorse the waiver. If the government sponsor determines to endorse the waiver, he/she must provide a letter.

IMBC-ZA

SUBJECT: Command Policy No. 40, Access Denial Waiver Process

The letter must indicate that the sponsor requests that the individual be granted unescorted access to accomplish a specific purpose, as well as the anticipated frequency and duration of such visits. If a contractor employee is terminated, the sponsor must inform the Garrison Commander so that unescorted access to the installation is no longer authorized.

d. Approval Process.

(1) The designated government official(s) will review the access denial waiver applications and make a fitness determination recommendation to the approving official. Unless otherwise delegated down, the Garrison Commander is the approving authority.

(2) The Garrison Commander or delegated official will review the waiver application and render a determination that ensures proper protection of good order and discipline, or health and safety on the installation.

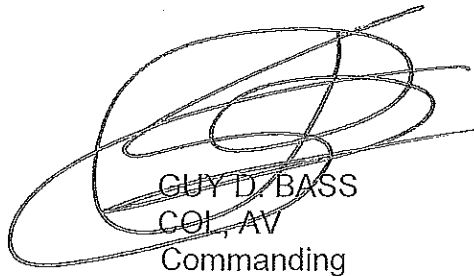
(3) The Garrison Commander or delegated official will provide a copy of the Determination to the individual, Director of Emergency Services and sponsoring agent.

(4) Individuals who have had a waiver request denied may request reconsideration from the Garrison Commander after one year from the date of the Commander's decision, or earlier if the individual can present significant information that was not available at the time of the original request or that the basis for the original denial was overturned, rescinded or expired.

6. Proponent: The Directorate of Emergency Services is the proponent for this USAG, Fort Buchanan policy. The point of contact is the Director at (787) 707-3940, DSN 740-3050.

2 Encls

1. Access Denial Criteria
2. Waiver Application



GUY D. BASS  
COL, AV  
Commanding

## Access Denial Criteria

Security personnel performing the access control mission and conducting the NCIC-III checks will deny installation access to any individual that has any of the following derogatory information on the NCIC-III check:

1. The NCIC-III contains criminal information about the individual that causes the senior commander to determine that the individual presents a potential threat to the good order, discipline, or health and safety on the installation.
2. The installation is unable to verify the individual's claimed identity based on the reasonable belief that the individual has submitted fraudulent information concerning his or her identity in the attempt to gain access.
3. The individual has a current arrest warrant in NCIC, regardless of the offense or violation.
4. The individual is currently barred from entry or access to a Federal installation or facility.
5. The individual has been convicted of crimes encompassing sexual assault, armed robbery, rape, child molestation, production or possession of child pornography, trafficking in humans, drug possession with intent to sell or drug distribution.
6. The individual has a U.S. conviction of espionage, sabotage, treason, terrorism or murder.
7. The individual is a registered sex offender.
8. The individual has been convicted of a felony within the past 10 years, regardless of the offense or violation.
9. The individual has been convicted of a felony firearms or explosives violation.
10. The individual has engaged in acts or activities designed to overthrow the U.S. Government by force.
11. The individual is identified in the Terrorist Screening Database (TSDB) as known to be or suspected of being a terrorist or belonging to an organization with known links to terrorism or support of terrorist activity. When this capability becomes available to DoD, security personnel performing installation access control personnel will strictly follow the Federal Bureau of Investigation's published engagement protocols.

Enclosure 1

11. Explain any circumstances that lessen the seriousness of the felony conviction(s) and show that you have been rehabilitated. Attach additional sheets if necessary.
12. Have you been denied access by any other federal organization? <i>(please circle)</i>
Yes                      No
If yes, indicate the reason for the denial.
13. List all references that you would like the review officer to consider on your behalf. Include name, address, telephone number, and relationship:

**VERIFICATION**

State of \_\_\_\_\_ )  
 County of \_\_\_\_\_ )

Under the penalty of perjury, the undersigned has examined this request for review and to the best of my knowledge and belief, it is true, complete, and correct.

\_\_\_\_\_  
 Your Signature

\_\_\_\_\_  
 Your printed name

\_\_\_\_\_  
 Date (Month, Day, Year)

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared \_\_\_\_\_ and acknowledged the execution of the foregoing instrument as his/her voluntary act and deed.

WITNESS, my hand and Notarial Seal, this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
 Notary Public, Written Signature

Enclosure 2