


The City of New York Department of Correction					Special Operations Division Rikers Island Security Unit																																
Form SOD/RISU2		CLEARANCE REQUEST AND AUTHORIZATION FORM				Effective 3/16/98																															
SECTION #1 –																																					
<p>Complete all of the required information in Sections #2, #3 and #4. Submission of a clearance request does not necessitate approval. The command receives Notification of denials via fax and/or in writing. Confirmation of approvals shall be telephonically effected as follows:</p> <table><tr><td>Wardens/Commanding Officers or Deputy Wardens shall initiate facility clearance requests. All other commands (bureaus, divisions or units) – Senior Staff Members or Commanding Officers or Executive Officers, only. It is the responsibility of each facility/command to ensure that visitors are advised of the security/safety issues of the Riker's Is. Correctional Complex (e.g., speed limit, securing vehicles, display of ID/pass, unauthorized items)</td><td>Category</td><td>Clearance Location</td><td>Telephone #</td></tr><tr><td></td><td>Vehicle Access/Pass</td><td>Construction Control Trailer</td><td>(718) 546-1578</td></tr><tr><td></td><td>Public Transportation</td><td>Rikers Is. Main Control Bldg.</td><td>(718) 546-1565</td></tr><tr><td></td><td>Problems/Information</td><td>Rikers Is. Clearance Office</td><td>(718) 546-1539</td></tr></table>								Wardens/Commanding Officers or Deputy Wardens shall initiate facility clearance requests. All other commands (bureaus, divisions or units) – Senior Staff Members or Commanding Officers or Executive Officers, only. It is the responsibility of each facility/command to ensure that visitors are advised of the security/safety issues of the Riker's Is. Correctional Complex (e.g., speed limit, securing vehicles, display of ID/pass, unauthorized items)	Category	Clearance Location	Telephone #		Vehicle Access/Pass	Construction Control Trailer	(718) 546-1578		Public Transportation	Rikers Is. Main Control Bldg.	(718) 546-1565		Problems/Information	Rikers Is. Clearance Office	(718) 546-1539														
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SECTION #2 – Command Requests / Escort Information																																					
Date Requested:	Requested By (Print Last and First Name)		Rank/Title:	Shield/ID#	Command	Telephone #:																															
Uniform Escort Provided? <input type="checkbox"/> Yes <input type="checkbox"/> No	Escort Officer (Print Last and First Name)		Rank:	Shield #:	Command:	Telephone #: (    )    -    -    -    -																															
Command Authorization <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	Sr. Staff/Comm. Off./Dep. Warden/Exec. Off.:		Rank/Title:	Shield/ID #:	Command:	Telephone #:																															
SECTION #3 – Clearance / Visit Information - COMPANY NAME:						072202048FMRD																															
Date of Visit:	Visitors' Full Name		Title	Visitors' Full Name	Title	V	i																														
	1.			6.		11.																															
Estimated Time of Arrival:	2.			7.		12.																															
	3.			8.		13.																															
Agency / DOC Affiliation	4.			9.		14.																															
	5.			10.		15.																															
Destinations (Check All That Apply):																																					
<table><tr><td><input type="checkbox"/> ARDC</td><td><input type="checkbox"/> JATC</td><td><input type="checkbox"/> Assets Management/Environmental Health</td><td><input type="checkbox"/> Correction Industries Div./Support Services Unit</td><td><input type="checkbox"/> Riker's Is Main Control Bldg</td><td><input type="checkbox"/> Riker's Is Visitor Control Bldg</td></tr><tr><td><input type="checkbox"/> AMKC</td><td><input type="checkbox"/> NIC</td><td><input type="checkbox"/> Bureau Chiefs' Trailer</td><td><input type="checkbox"/> DGS (Dept. of General Svcs.) Trailer</td><td><input type="checkbox"/> Transportation Div.</td><td></td></tr><tr><td><input type="checkbox"/> CIFM/HHP</td><td><input type="checkbox"/> OBCC/CPSU</td><td><input type="checkbox"/> Chapel</td><td><input type="checkbox"/> Dockhouse/Ferryboats (OBCC Annex)</td><td><input type="checkbox"/> Shore Rd. Trailer (Specify Area/Unit)</td><td></td></tr><tr><td><input type="checkbox"/> GMDC</td><td><input type="checkbox"/> RMSC/STEP</td><td><input type="checkbox"/> Chief of Department's Field Office</td><td><input type="checkbox"/> Firehouse/K-9 Unit</td><td><input type="checkbox"/> Special Operations Div. (Specify Area/Unit)</td><td></td></tr><tr><td><input type="checkbox"/> GRVC</td><td><input type="checkbox"/> WF/CDU</td><td><input type="checkbox"/> Construction Management Unit</td><td><input type="checkbox"/> Powerhouse</td><td><input type="checkbox"/> Other (Specify Location):</td><td></td></tr></table>								<input type="checkbox"/> ARDC	<input type="checkbox"/> JATC	<input type="checkbox"/> Assets Management/Environmental Health	<input type="checkbox"/> Correction Industries Div./Support Services Unit	<input type="checkbox"/> Riker's Is Main Control Bldg	<input type="checkbox"/> Riker's Is Visitor Control Bldg	<input type="checkbox"/> AMKC	<input type="checkbox"/> NIC	<input type="checkbox"/> Bureau Chiefs' Trailer	<input type="checkbox"/> DGS (Dept. of General Svcs.) Trailer	<input type="checkbox"/> Transportation Div.		<input type="checkbox"/> CIFM/HHP	<input type="checkbox"/> OBCC/CPSU	<input type="checkbox"/> Chapel	<input type="checkbox"/> Dockhouse/Ferryboats (OBCC Annex)	<input type="checkbox"/> Shore Rd. Trailer (Specify Area/Unit)		<input type="checkbox"/> GMDC	<input type="checkbox"/> RMSC/STEP	<input type="checkbox"/> Chief of Department's Field Office	<input type="checkbox"/> Firehouse/K-9 Unit	<input type="checkbox"/> Special Operations Div. (Specify Area/Unit)		<input type="checkbox"/> GRVC	<input type="checkbox"/> WF/CDU	<input type="checkbox"/> Construction Management Unit	<input type="checkbox"/> Powerhouse	<input type="checkbox"/> Other (Specify Location):	
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Reason For Visit				Type of Access/Pass																																	
<input type="checkbox"/> Construction <input type="checkbox"/> Delivery <input type="checkbox"/> Repair <input type="checkbox"/> Volunteer Work				<input type="checkbox"/> Gate #1 Restricted <input type="checkbox"/> East/West Parking Field																																	
<input type="checkbox"/> Clergy <input type="checkbox"/> Meeting <input type="checkbox"/> Survey <input type="checkbox"/> Other (Specify) _____				<input type="checkbox"/> Gate #2 Restricted <input type="checkbox"/> Gate #1 Unrestricted <input type="checkbox"/> Other (Specify) _____																																	
SECTION #4 – Vehicle Information																																					
<input type="checkbox"/> Check Here if None    In the event the number of vehicles exceeds four (4), attach additional vehicle information on a 600ar.																																					
Vehicle	Year	Make	Model	Color	License Plate	State	Vehicle Type																														
#1							<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Bus <input type="checkbox"/> Truck <input type="checkbox"/> Other																														
#2							<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Bus <input type="checkbox"/> Truck <input type="checkbox"/> Other																														
#3							<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Bus <input type="checkbox"/> Truck <input type="checkbox"/> Other																														
#4							<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Bus <input type="checkbox"/> Truck <input type="checkbox"/> Other																														
SECTION #5 – FOR SOD USE ONLY:																																					
Date Received:	Reviewed By (Clearance Officer)		Rank:	Shield #:	<div>SOD Time Stamp</div>																																
Time Received:	Approved By (SOD/RISU Supervisor)		Rank:	Shield #:																																	
Final Determination <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Type of Access/Pass: <input type="checkbox"/> Gate #2 Restricted	<input type="checkbox"/> Gate #1 Restricted <input type="checkbox"/> Gate #1Unrestricted	<input type="checkbox"/> East/West Parking Field <input type="checkbox"/> Other (Specify) _____																																		
Remarks:																																					