



**INSTRUCTIONS:** If you would like to obtain a Hazardous Materials Endorsement (HME) for your commercial driver's license, you are required to complete a HME Threat Assessment Program (HTAP) application. To undergo this assessment, all applicants must provide information requested below and the appropriate documentation to verify their identity and immigration status as part of the application process. Completed forms (including an applicant's signature) must be submitted in person at the beginning of the application process. Applicants are encouraged to take their time and review all information included on the form. Please confirm your eligibility before applying by reviewing Section VII "Eligibility Requirements" on page 3. If you are initially disqualified, you may be eligible for a HME and should apply for an appeal or a waiver, which gives you the opportunity to provide additional information and documentation to support your eligibility. You must wait for an Initial Determination of Threat Assessment (IDTA) letter before applying for an appeal or a waiver. All fields are required unless otherwise noted.

<b>SECTION I -- PERSONAL INFORMATION</b>					
NAME (Last, First, Middle, Suffix)				SOCIAL SECURITY NUMBER (Optional)	
PREVIOUS NAMES USED (Last, First, Middle, Suffix)			COMMERCIAL DRIVER LICENSE (CDL) NUMBER	STATE THAT ISSUED CDL	
HME TYPE (H or X)	TYPE OF APPLICATION <input type="checkbox"/> HME Renewal <input type="checkbox"/> HME Transfer <input type="checkbox"/> New		IF TRANSFERRING HME, LIST PRIOR CDL NUMBER (If known) AND STATE OF ISSUANCE CDL Number: _____ State: _____		
SEX <input type="checkbox"/> Male <input type="checkbox"/> Female	DOB (mm/dd/yyyy) / /	HEIGHT FT. IN.	WEIGHT LBS.	HAIR COLOR	EYE COLOR
<b>SECTION II -- ADDRESSES</b>					
CURRENT RESIDENTIAL ADDRESS					
CITY		STATE		ZIP	
CURRENT MAILING ADDRESS (If different than residential address)					
CITY		STATE		ZIP	
HOME PHONE (Include area code)		WORK PHONE (Include area code)		CELL PHONE (Include area code)	
EMAIL ADDRESS					
PREVIOUS RESIDENTIAL ADDRESS					
CITY		STATE		ZIP	
<b>SECTION III -- CITIZENSHIP</b>					
Are you a U.S. citizen? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>					
COUNTRY OF CITIZENSHIP		NATURALIZATION DATE (If applicable)		STATE DEPARTMENT FORM FS-240, FS-545, OR DS-1350 NUMBER (If born abroad to U.S. citizens)	
U.S. PASSPORT NUMBER (If applicable) AND EXPIRATION DATE		LEGAL STATUS DOCUMENT AND NUMBER (Ref. Page 2, Sec. VI) AND EXPIRATION DATE (If applicable)		ALIEN REGISTRATION NUMBER (If applicable)	
CITY OF BIRTH		STATE OF BIRTH (Not required if born outside U.S.)		COUNTRY OF BIRTH	

## SECTION IV -- EMPLOYMENT HISTORY

CURRENT EMPLOYER NAME <i>(If currently in military, put military employment information here)</i>		CURRENT EMPLOYER PHONE <i>(Include area code)</i>
CURRENT EMPLOYER ADDRESS		
CITY	STATE	ZIP
1. Have you undergone or are you undergoing a DHS (including TSA) security threat assessment?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes: Name of program (e.g., Aviation Worker, Certified Cargo Screening, Indirect Air Carrier, TWIC, FAST, MMD, etc.): _____
2. Have you had or do you have a DHS/TSA credential (e.g., Aviation Worker, Certified Cargo Screening, Indirect Air Carrier, TWIC, FAST, MMD, etc.)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes: Type of credential _____ Credential reference number: _____

## SECTION V -- CERTIFICATIONS/SIGNATURE

**Please refer to Section VII of this form, "Eligibility Requirements." Answering "Yes" to any questions below does not mean automatic disqualification. Applicants convicted of criminal disqualifiers may be eligible to apply for and be granted a waiver and obtain an HME.**

1. Have you been convicted, or found not guilty by reason of insanity, of any disqualifying felony listed in Section 1, Part A, in any jurisdiction, military or civilian, in the last 7 years before the date of this application?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you been released from incarceration in any jurisdiction, military or civilian, for committing any disqualifying felony listed in Section 1, Part A, in during the 5 years before the date of this application?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been convicted, or found not guilty by reason of insanity, of any disqualifying felony listed in Section 1, Part B, in any jurisdiction, military or civilian?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Are you wanted or under indictment for any disqualifying crime listed in Section 1, Parts A or B?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Have you ever been found by a court or other lawful authority as lacking mental capacity or involuntarily committed to a mental institution?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**I have disclosed any and all information with this application related to disqualifying crimes committed and as required by Federal regulation 49 CFR 1572.5(b), I understand my continuing obligation to disclose to TSA within 24 hours if I am convicted or found not guilty by reason of insanity of any disqualifying crime, or adjudicated as a mental defective or committed to a mental institution, while I have a hazardous materials endorsement for a CDL.**

**The information I have provided on this application is true, complete, and correct to the best of my knowledge and belief and is provided in good faith. I understand that a knowing and willful false statement, or an omission of a material fact, on this application can be punished by fine or imprisonment or both (see section 1001 of Title 18 United States Code), and may be grounds for denial of a hazardous materials endorsement.**

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## SECTION VI -- LEGAL STATUS DOCUMENTS

**If you possess any of the following documents or cards, please identify it within the "Citizenship" section on page 1 of this form, as well as list the number assigned to your document/card:**

<ul style="list-style-type: none"> <li>• DSP-150, Border Crossing Card</li> <li>• I-94, Arrival/Departure Record</li> <li>• I-151 or I-551, Permanent Resident Card</li> <li>• I-197 or I-179, U.S. Citizenship ID Card</li> <li>• I-327, Re-entry Permit</li> <li>• I-571, Refugee Travel Card</li> <li>• I-688, Temporary Resident Card</li> </ul>	<ul style="list-style-type: none"> <li>• I-688A or I-766, Employment Authorization Card</li> <li>• I-688B, Employment Authorization Document</li> <li>• I-872, American Indian Card</li> <li>• I-873, Northern Mariana Card</li> <li>• N-550 or N-570, Certificate of Naturalization</li> <li>• N-560 or N-561, Certificate of U.S. Citizenship</li> <li>• U.S. Birth Certificate</li> </ul>
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## SECTION VII -- ELIGIBILITY REQUIREMENTS

### **Section 1: List of Disqualifying Criminal Offenses for an HME (49 CFR 1572.103)**

#### **Part A: Interim Disqualifying Offenses**

A driver will be disqualified from holding an HME on a CDL if he or she was convicted or found not guilty by reason of insanity within the previous seven years or was released from prison in the last five years for any of the following felonies:

- a) Unlawful possession, use, sale, manufacture, purchase, distribution, receipt, transfer, shipping, transporting, delivery, import, export of, or dealing in a firearm or other weapon
- b) Extortion
- c) Dishonesty, fraud, or misrepresentation, including identity fraud and money laundering (except welfare fraud and passing bad checks)
- d) Bribery
- e) Smuggling
- f) Immigration violations
- g) Distribution, possession w/ intent to distribute, or importation of a controlled substance
- h) Arson
- i) Kidnapping or hostage taking
- j) Rape or aggravated sexual abuse
- k) Assault with intent to kill
- l) Robbery
- m) Fraudulent entry into a seaport
- n) Lesser violations of the RICO (Racketeer Influenced and Corrupt Organizations) Act
- o) Conspiracy or attempt to commit crimes in this section

#### **Part B: Permanently Disqualifying Criminal Offenses**

A driver will be disqualified from holding an HME on a CDL if he or she was convicted or found not guilty by reason of insanity for any of the following felonies:

- a) Espionage or conspiracy to commit espionage
- b) Sedition or conspiracy to commit sedition
- c) Treason or conspiracy to commit treason
- d) A federal crime of terrorism
- e) A crime involving a TSI (transportation security incident). Note: A transportation security incident is a security incident resulting in a significant loss of life, environmental damage, transportation system disruption, or economic disruption in a particular area. The term "economic disruption" does not include a work stoppage or other employee-related action not related to terrorism and resulting from an employer-employee dispute.
- f) Improper transportation of a hazardous material under 49 U.S.C. 5124 or a comparable state law
- g) Unlawful possession, use, sale, distribution, manufacture, purchase...or dealing in an explosive or explosive device
- h) Murder
- i) Threat or maliciously conveying false information knowing the same to be false, concerning the deliverance, placement, or detonation of an explosive or other lethal device in or against a place of public use, a state or government facility, a public transportation system, or an infrastructure facility
- j) Certain RICO (Racketeer influenced and Corrupt Organizations) Act violations where one of the predicate acts consists of one of the permanently disqualifying crimes
- k) Attempt to commit the crimes in items (a)-(d) of this section
- l) Conspiracy or attempt to commit the crimes in items (e)-(j) of this section
- m) Individuals convicted of the crimes in items (a)-(d) of this section are **not** eligible to apply for a waiver

#### **Part C: Under Want or Warrant**

A driver will be disqualified from holding an HME on a CDL if he or she is wanted or under indictment in any civilian or military jurisdiction for a felony listed under Part A or Part B until the want or warrant is released.

### **Section 2: Permissible Legal Status to Hold an HME (49 CFR 1572.105)**

An individual applying for a security threat assessment for an HME must be a national of the United States or:

- a) A lawful permanent resident of the United States;
- b) A refugee admitted under 8 U.S.C. 1157;
- c) An alien granted asylum under 8 U.S.C. 1158;
- d) An alien in valid M-1 nonimmigrant status who is enrolled in the United States Merchant Marine Academy or a comparable State maritime academy. Such individuals may serve as unlicensed mariners on a documented vessel, regardless of their nationality, under 46 U.S.C. 8103;
- e) A nonimmigrant alien admitted under the Compact of Free Association between the United States and the Federated States of Micronesia, the United States and the Republic of the Marshall Islands, or the United States and Palau;
- f) An alien in lawful nonimmigrant status who has unrestricted authorization to work in the United States, except—
  - 1) An alien in valid S-5 (Informant of criminal organization information) lawful nonimmigrant status;
  - 2) An alien in valid S-6 (Informant of terrorism information) lawful nonimmigrant status;
  - 3) An alien in valid K-1 (Fianco(e)) lawful nonimmigrant status; or
  - 4) An alien in valid K-2 (Minor child of Fianco(e)) lawful nonimmigrant status.
- g) An alien in the following lawful nonimmigrant status who has restricted authorization to work in the United States—
  - 1) B1/OCS Business Visitor/Outer Continental Shelf;
  - 2) C-1/D Crewman Visa;
  - 3) H-1B Special Occupations;
  - 4) H-1B1 Free Trade Agreement;
  - 5) E-1 Treaty Trader;
  - 6) E-2 Treaty Investor;
  - 7) E-3 Australian in Specialty Occupation;
  - 8) L-1A Intracompany Transfer -- Managerial or Executive Positions;
  - 9) L-1B Intracompany Transfer -- Specialized Knowledge Staff;
  - 10) O-1 Extraordinary Ability; or
  - 11) TN North American Free Trade Agreement.

**PRIVACY ACT STATEMENT:** Authority: The authority for collecting this information is 49 U.S.C. 114, 40113, and 49 U.S.C. 5103a. Principal Purpose(s): This information is needed to verify your identity and to conduct a security threat assessment to evaluate your suitability for a hazardous materials endorsement for a commercial driver's license. Furnishing this information, including your SSN or alien registration number, is voluntary; however, failure to provide it will prevent the completion of your security threat assessment, without which you cannot be granted a hazardous materials endorsement. Routine Use(s): Routine uses of this information include disclosure to the FBI to retrieve your criminal history record; to TSA contractors or other agents who are providing services relating to the security threat assessments; to appropriate governmental agencies for licensing, law enforcement, or security purposes, or in the interests of national security; and to foreign and international governmental authorities in accordance with law and international agreement. For additional details, see TSA's system of records notice for DHS/TSA 002, published in the Federal Register at 69 Fed. Reg. 57348 (September 24, 2004).

**PAPERWORK REDUCTION ACT STATEMENT:** Statement of Public Burden: Public Burden: It is estimated that the time to complete this form is approximately 30 minutes. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The control number for this collection is OMB 1652-0027.