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**INSTITUTION**  
**SUPPLEMENT**

**OPI:** Correctional Services  
**NUMBER:** MIM 5267.08E  
**DATE:** April 19, 2013  
**SUBJECT:** Inmate Visiting

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1. **PURPOSE AND SCOPE:** The Federal Detention Center encourages visiting that is conducive to maintaining family and community relationships. To implement Program Statement 5267.08, Visiting Regulations, dated May 11, 2006. The Warden has the authority to restrict or suspend an inmate's regular visiting privileges temporarily when there is reasonable suspicion that the inmate has acted in a way that would indicate a threat to the good order or security of the institution. Ordinarily, the duration of the restriction or suspension should be limited to the time required to investigate and initiate the discipline process.

Reasonable suspicion exists when reliable information and/or facts are presented to the Warden that the inmate is engaged, or attempting to engage in criminal or other prohibited behavior. Reasonable suspicion must be directed to the inmate(s)/visitor(s) in question.

In determining reasonable suspicion, staff should consider whether the available information could reasonably lead a person with correctional experience to suspect that the inmate is engaged in criminal or other prohibited behavior.

2. **DIRECTIVES AFFECTED:**

A. **DIRECTIVES REFERENCED:**

- 1) Program Statement 1315.07, Inmate Legal Activities, dated November 5, 1999.
- 2) Program Statement 4500.07, Trust Fund/Deposit Fund Manual, dated April 19, 2010.
- 3) Program Statement 5100.08, Security Designation and Custody Classification System, dated September 12, 2006.
- 4) Program Statement 5267.08, Visiting Regulations, dated May 11, 2006.
- 5) Program Statement 5270.09, Inmate Discipline Program, dated July 8, 2011.
- 6) Program Statement 5270.10, Special Housing Units, dated July 29, 2011.
- 7) Program Statement 5280.09, Inmate Furloughs, dated January 20, 2011.

- 8) Program Statement 5500.11, Correctional Services Manual, dated October 10, 2003.
- 9) Program Statement 5510.12, Searching, Detaining or Arresting Visitors to Bureau Grounds and Facilities, dated January 15, 2008.
- 10) Program Statement 5521.05, Searches of Housing Units, Inmates and Inmate Work Areas, dated June 30, 1997.
- 11) Program Statement 7331.04, Pre-Trial Inmates, dated January 31, 2003.

B. DIRECTIVES RESCINDED: Institution Supplement, Inmate Visiting, 5267.08D, dated April 6, 2012.

3. STANDARDS REFERENCED: American Correctional Association Standards for Adult Detention Facilities, 4-ALDF-2A-20, 4-ALDF-2A-61, 4-ALDF-5B-02, 4-ALDF-5B-03, 4-ALDF-5B-04.

4. DESCRIPTION OF RULES OR PROCEDURES:

A. Visiting Location: Ordinarily, visits not requiring any special security measures will be conducted in the visiting room located on the first floor. This will also include inmates housed in the Special Housing Unit. Separate areas within the visiting room have been designated for attorney visits. These rooms will not be utilized for social or religious visits under any circumstances.

B. Visiting Hours: Visiting hours are from 7:00 a.m. to 9:00 p.m. Sunday through Saturday. Attachment A has the social visiting schedule for all units.

NOTE: Should inmates be present in the visiting room during official counts or institutional lockdown accountability census checks, they will be counted in the visiting room, unless directed otherwise.

C. Visiting Limitations: The visiting time will begin when the inmate arrives to the visiting room. Inmates will be allowed four (4) hours of social visits per month, one hour per visit. Inmates designated to Unit B will not be charged visitation points. Only three (3) visitors will be allowed to visit an inmate at one time. Infants and toddlers (3 years and younger) who are held at all times will not be counted as a visitor. Inmates will be allowed only one social visit on a single day. Once a visit begins, no other visitors will be allowed into the visiting area. Visitors may only visit one inmate at a time unless the inmates are immediate family members and have prior approval from Unit Team. Any questions related to visiting more than one inmate at a time will be addressed by the unit staff and documented on the computer for visiting room staff. The maximum rated capacity in the

visiting room will not exceed 270, for code and fire safety reasons. If the visiting room reaches the maximum capacity, the visiting room OIC may start to terminate visits, beginning with the first arrivals.

- D. Visiting Processing: Upon initial arrival to the institution, an inmate will be provided an Admission and Orientation handbook detailing visiting procedures and a Request for Visitor Approval Form (Attachment B). A visiting list will be established for an inmate by the Unit Team within seven (7) days of the inmate's arrival. However, this is only contingent upon the inmate properly submitting all proper information to his/her Unit Team in a timely manner. This information is not limited to the following: (1) Request for Visitor Approval Form, (2) The Visitor Information Sheet (BP -629, Attachment C), if further background information is necessary or required. It is the inmate's responsibility to provide written guidelines to their visitors by mailing the Request for Visitor Approval Form and the Visitor Information Sheet (BP-629) to prospective visitors. All the required forms need to be returned to the Unit Team for processing. Once the inmate visitor is approved, the unit team will place the visitor on the inmate's visiting list in the Visiting Program, which maintains a record of visitors for all inmates.
- E. Disapproving Proposed Visitors: If the background information reveals that visitation privileges for a proposed visitor would present security concerns or disrupt the orderly running of the institution, the Warden may deny visiting privileges. Documentation reflecting this decision should be maintained in section 2 of the Privacy Folder in the Inmate Central File. If such a denial is made, the Unit Team will notify the inmate.

Procedures for backup to the Visiting Program:

When the computer system is not functioning or inoperative, staff will notify the Operations Lieutenant. Inmates are given hard copies of their visiting lists which may be used as proof that the visitor has been approved to visit. In the event the inmate does not have a copy present, staff must first contact the inmate's unit team before turning away the visitor.

No Unit Team member will accept any visitation forms from an inmate until all information is completed and properly submitted. Once an individual has been approved for visitation, the unit counselor will place the individual on the inmates visiting list. A visiting list can only be amended every 90 days.

- 1) Pretrial and Holdover inmates: Visiting lists for pretrial and holdover inmates who are pending transportation to their initially designated BOP institution will be limited to immediate family members.

Holdover inmates who are on a writ from BOP facilities and who have an authorized visiting list prepared at the parent facility will be allowed to visit with immediate family members, significant others, and mother of their children. A background check (NCIC) will be completed on potential visitors due to limited information received on these individuals.

- 2) Work Cadre: Designated inmates may have up to 12 visitors on their approved visiting list, which includes immediate family, other relatives and/or friends. The list may only be changed every 90 days. Other relatives and friends will be those individuals with whom the inmate had an association with prior to incarceration. Exceptions to the prior relationship rule may be made, particularly for inmates without other visitors, when it is shown that the proposed visitor is reliable and poses no threat to the security or good order of the institution. This association must be determined by the inmate's unit team to be a positive relationship. These relatives and friends will be added to the visiting list only after a favorable background check. The approval must be made by the inmate's Unit Manager. The inmate will be notified of approval or disapproval so that he/she can notify the proposed visitor.
- 3) Members of the Immediate Family: For definition see Program Statement 5267.08. If an individual has a different surname, the unit team will require documentation prior to the initial visit.

Members of the immediate family will normally be approved without further investigation, except as noted above. The inmate will be required to forward the Visiting Regulations and the Information and Release Authorization Forms to the proposed visitors. The Visitor Information Sheet must be signed and returned to the Unit Counselor by the proposed visitor prior to any further action concerning visiting. Upon receipt of the completed forms, the unit counselor will initiate a NCIC check.

Unless unusual circumstances exist, the requirement to re-approve visitors already identified on the inmate's visiting list is no longer required for inmates transferring from one institution to another.

The State of Florida does not recognize "common law marriage." Although the State of Florida does not recognize "common law" marriages, FDC Miami will consider recognizing "significant other" relationships on an individual basis. Significant others may visit after appropriate documentation is provided to the unit team, such as a joint bank account or warranty deed in both names. Additionally, parents of children will be considered on an individual

basis. This documentation should include the birth certificate of the child or similar official information together with completed Information Questionnaire and Release Forms. These individuals should only be allowed to visit if there are no strong circumstances which preclude visiting. The visitor must be accompanied with the child/children.

- 4) Business Visitors: Business visitors for Pretrial inmates will be processed according to Program Statement 5267.08, Visiting Regulations, page 8, section 13.
- 5) Special Visits: The Warden or Associate Wardens, and Institutional Duty Officer will be the only vested authority to grant special social visits for approved social visitors. Visiting room staff will not grant special visits if they are not signed by Warden, Associate Warden, or Institution Duty Officer. When consideration is given to evaluate or authorize a special visit, staff will consider the following criteria:
  - (1) Does the visitor reside outside a 250 mile radius from the institution or in a foreign country. If so, consideration may be approved for two (2) non-consecutive, two (2) hour periods during the same week, once every 90 days. Visitors residing in the state of Florida must prove that a significant hardship exists such as a medical condition, or death of a family member before a special visit is considered. If approved, the special visit will be limited to a two (2) hour duration and scheduled during the inmate's regular visiting schedule. Any scheduling exceptions must be indicated on the Special Visiting form (Attachment D). Consideration for a Special visit does not imply approval. Points will be assessed against the inmate's allocated visitation points, unless directed otherwise. Special visits will be supervised by assigned Visiting Room staff.

Unit Managers will not authorize co-defendant visits between non-immediate family members incarcerated at FDC Miami. Unit Managers may only approve co-defendant visits for immediate family members including common-law husband and wife who are incarcerated at FDC Miami.

These visits will be limited to (2) hours and will be considered for approval once a month. Unit Managers will schedule these visits on the last Monday of the month between the hours of 5:00 p.m. - 9:00 p.m. Inmates must initiate the request for a special visit through the Unit Team. The Unit Manager responsible for the female inmates will complete the proper special visiting memorandum for visits between female and male inmates. Female inmates will be required to submit a written request during the first week of the

month. Unit Managers may also initiate visits between immediate family male inmates housed at this facility. The unit counselor will notify the inmate of those visitors who have been approved.

- 6) Religious Visits: An inmate wanting to receive visits from his or her minister of record must submit a written request to the Chaplain. Upon approval, unit staff will add the name and title (minister of record) to the inmate's visiting list.

An inmate may only have one minister of record on his/her visiting list at a time. The addition of the minister of record will not count against the total number of authorized regular visitors an inmate is allowed to have on his or her visiting list, and will not count against the total number of social visits allowed.

Clergy: Visits from the clergy (other than the minister of record) will be in accordance with the general visitor process, and will count against the total number of regular visits allowed.

Religious visitors will submit to the same search procedures as any general or social visitor.

Religious head wear is defined as an extension of the "person" and not defined as "personal effects". Staff are authorized to search religious head wear. If a visitor refuses to this type of search, the Chaplain should be contacted. However, if the visitor/volunteer continues to refuse to the search, they will not be permitted into the facility.

- 7) Attorney Visits: Attorneys and their approved attorney representatives (law clerks, paralegals, and investigators) may visit inmates in matters relating to an inmate's legal affairs. However, prior authorization is required from the Legal Liaison.

Attorneys may secure authorization for approved attorney representatives by submitting the Application Form (BP-S243.013, Attachment E) to the Legal Liaison. These attorney representatives may not conduct legal visitation if they are members of the inmate's immediate family or approved social visitors, unless approved by the Legal Liaison.

Legal visiting hours are Sunday through Saturday from 7:00 a.m. to 9:00 p.m. The use of a VCR/DVD is available at their request. Attorneys may submit a request via e-mail to consult with their clients ahead of time. These e-mails will be checked by the Visiting Room OIC.

No more than three (3) legal visitors per attorney are allowed in the visiting room unless prior arrangements have been made through the Legal Liaison.

NOTE: In the event of an emergency situation, the Duty Officer may approve an attorney visit prior to or after normal visiting hours. Visiting hours are from 7:00 a.m. to 9:00 p.m. for legal visitors. There are cutoff periods during this time. There will be no inmate movements one hour prior to any counts. All legal visitors must enter the visiting area no later than thirty (30) minutes prior to any official count and no later than one (1) hour prior to the conclusion of visiting hours.

- 8) Official Visits: Representatives of law enforcement agencies, U.S. Parole or Probation Offices, U.S. Public Defenders, Foreign Consulates, Court assigned Sentencing Officials, Attorneys, approved attorney representatives and mental health professionals performing court ordered examinations will receive priority when processing. Official visitors, except the Assistant U.S. Attorney, U.S. Parole or Probation Officers, U. S. Public Defenders and Federal Law Enforcement Officers will be required to complete a Notification to Visitor Form (Title 18, Attachment F) to document their visit.
- F. Transportation Assistance: Directions to the Federal Detention Center and telephone numbers for transportation assistance are available, Visitor Informational Map (Attachment G), and the Visitor Transportation Information Sheet (Attachment H). FDC Miami does not have pay phones available. Visitors will be responsible for arranging their own transportation.
- G. Visits for Inmates at the Local Hospital:
- 1) Inmates admitted to local hospitals for medical treatment will not be allowed any visits unless authorized by the Warden/designee. In instances authorized, visitors will only visit according to that medical facility's visiting times, and visitors will be limited to only immediate family members, except when the inmate's medical condition is grave and unless a broader visitation is authorized.
- These visits shall not exceed more than one hour in duration and will be done with direct staff supervision. Identification, search, and all relevant procedures applicable at the institution will be in effect.

Visits will be prohibited and/or restricted for inmates under strict medical care, i.e., suffering from infectious disease, or who are psychotic, suicidal, or otherwise not in a condition to see visitors. The situation will be carefully explained to the visitor and documented in the inmate's central file. Inmates with medical conditions will be reviewed by the Chief Medical Officer or in his/her absence, the Health Services Administrator, in consultation with the Captain to determine whether visiting will be permitted. Ultimately, visiting for inmates with medical conditions will be addressed by the Medical and/or Psychology staff, in conjunction with the Administrative Duty Officer. If a visit is granted, the location will be decided by these staff.

- H. No Visitors Requested: If an inmate does not request to receive visits, a notation will be made in the visiting program and placed in the central file. On the screen where visitors are normally listed, it should be keyed in as "No Visitors Requested".
- I. Administrative Detention/Disciplinary Segregation: Inmates in Administrative Detention or Disciplinary Segregation status will be permitted to visit. SHU inmates are allowed to visit in the Main Visiting Area. The inmate(s) will be seated near the Visiting Room Officer during their social visits. For visiting schedule information, refer to Attachment A of this supplement.

Inmates who pose a greater threat to the security and orderly operation of the institution will visit in the non-contact visiting room located in the Special Housing Unit. Legal visits in Special Housing Unit can be held in the attorney room or in the non-contact room. SHU staff will be responsible for monitoring the visits in the non-contact room. Children under the age of 16 years old will not be permitted to visit in the non-contact visiting room due to its location in the SHU. The SHU Lieutenant or Operations Lieutenant will be notified prior to any visits in the non-contact visiting room.

- J. Due to the mission of FDC Miami, it is not uncommon to house inmates with a separatee inside the institution. In order to protect these individuals, the Visiting Room Officers will check their rosters for any separation concerns prior to the inmate being allowed into the Visiting Room. The Visiting Room OIC will ascertain whether the inmate's separatee is in the Visiting Room before allowing the visit. The officers will deny the visit, if a separatee is in the visiting area. The family members of a separatee will not be permitted in the visiting area during this time.

At no time will separatees be allowed into the visiting area at the same time.



- K. Attorneys: Attorneys will only be allowed to see one inmate at a time. Each inmate will be listed on the Notification to Visitor Form. If the attorney wishes to interview more than one inmate, the inmates will be escorted to the visiting room not more than three at a time. If the attorney wishes to interview more than three inmates, it is the responsibility of the attorney to notify the Visiting Room Officer when the third inmate is being interviewed so that the other two may be processed and returned to their unit. All co-defendant meetings must be prearranged and scheduled with the Legal Liaison.
- L. Processing of Visitors: All visitors will be processed into the institution in accordance with Institutional Supplements MIM 5500.09K, Entrance Operating Procedures and MIM 5510.12E, Searching, Detaining, or Arresting Visitors To Bureau Grounds and Facilities. Photo Identification must be a valid state or government issued photo identification. No foreign ID will be accepted, unless supported with proper documentation (i.e., Valid US Visa, Passport w/I-94 card or stamp). All drivers' license will be scanned to the Early Warning Scan. If the ID does not work, the visitor will be required to submit another valid governmental ID (i.e., Valid Green Card, Residency, Military ID, or Work-Permit).

All authorized items entering the visiting room must be carried in a clear plastic container/bag. The container/bag should not exceed more than a 12 X 12 in size.

All visitors will be required to clear the metal detector. Visitors failing to clear a walk-through metal detector must be searched using a hand-held metal detector. Failure to clear the hand-held metal detector may qualify as reasonable suspicion to perform a further pat or visual search. Some situations may not be remedied by a pat search, thus requiring a limited visual search. For example, a concealed medical device, such as a knee brace under clothing may trigger the walk-through and hand-held metal detectors. In such cases, a limited visual search will be required to confirm the device's presence and qualification as a permitted object. Also, some items of clothing, such as an underwire bra, may trigger the metal detectors, thus requiring a limited visual search for the same reason. In both type cases, it is important that a limited visual search always be performed discreetly, in a private area away from others, and by staff members of the same sex as the visitor being searched.

In cases such as these, the Operations Lieutenant will be contacted. Only the Warden or acting Warden may authorize a visual search of a visitor. This authorization must be attained prior to conducting the visual search.

Children Under Sixteen. Children under the age of 16 may not visit unless accompanied by a responsible adult. Children shall be kept under supervision of a responsible adult. There are no special areas for children. When Education Parenting classes are being taught in the Parenting room, children will be allowed to enter under the supervision of their parents. (Exceptions in unusual circumstances may be made by special approval of the Warden).

The signature of a parent or legal guardian on the Visitor Information form (BP-629) is necessary to process a request for an applicant under 18 years of age. Ordinarily, completing the questionnaire portion of this form (items 1 through 14) is not required if such an applicant is a verified immediate family member of the requesting inmate.

M. Dress Code:

- 1) Visitors: Visitors will be expected to wear clothing which is neither provocative nor enticing to the extent that a disruption to the orderly running of the institution could ensue. The following attire is strictly prohibited:
  - a. Shorts (except for children up to age 7)
  - b. Sleeveless garments (except for children up to age 7 )
  - c. Sweat pants, sweat shirts, sun dresses, leotards, wrap around skirts, crop tops, low-cut blouses, zippered dresses/shirts, button down skirts or dresses or low cut dresses.
  - d. Halter tops, tube tops, bath suits or backless tops
  - e. Hats, caps, headbands, head scarfs, hooded garments, wigs, hairpieces, and sunglasses
  - f. Spandex pants, Tights or clothing with revealing holes
  - g. No extra clothing or outer garments, coats, overcoats, jackets, or windbreakers
  - h. Any clothing similar to that issued to inmates or staff uniforms including plain white T-shirts.
  - i. Clothing that is sexually suggestive, revealing or any type of garment that is see through. Brassieres are required.

Clothing which is sexually suggestive or revealing will not be allowed. No bare feet will be allowed except for infants. No clothing that is similar to that issued to inmates will be allowed, i.e., khaki, orange or green military type clothing.

Staff will not provide visitors with a Title 18 Form if a visitor's dress attire is inappropriate for visitation. Staff will provide a visitor with the dress code restrictions. If a visitor requests to speak with a supervisor, Front Lobby staff will notify either the Operations

Lieutenant or Duty Officer. This official will be responsible in determining, if the attire is suitable for visitation.

- 2) Inmates: Inmates entering the visiting area will be dressed in institutional clothing. No sneakers will be allowed unless medically required. All inmates must wear institution issued shoes. Underclothing is required. All clothing must be clean and neat in appearance. Inmates may carry the following items:
- a. One comb
  - b. One handkerchief
  - c. One wedding band (no stone)
  - d. Legal materials
  - e. Prescription Eyeglasses (if required)
  - f. Belt (Cadre Unit)
  - g. Religious Medallion/Religious headgear

All items taken into the visiting room will be inventoried, inspected, and noted on the inventory sign in/out sheets. The same identical items must leave the visiting room with the inmate.

Upon completion of all visits, inmates departing will be identified, strip searched, and processed using the B.O.S.S. chair or hand-held metal detector. Inmates will not be permitted to carry out any items other than those allowed to be taken in.

Inmates entering for a legal visit will be allowed to bring legal materials which pertain to their current case. These materials will be inspected by the visiting room officer for contraband.

- N. Inmate and Visitor Conduct: All visitors arriving in the visiting room will report to the main desk and receive their assigned table number. The visiting room officer reserves the right to assign seating at all times. The visit will be conducted only at the assigned table. Inmates and their visitors will follow all instructions given by the visiting room staff at all times, if not, it will be grounds for terminating the visit.
- 1) Inmates will report to the main desk to be checked in, turn over their identification card to the officer and be directed to their assigned table. Inmates are prohibited from leaving their assigned table during the duration of their visit. Inmates will use the restroom under direct supervision of a visiting room officer. Inmates are prohibited from using the vending machines. The vending machine areas are unauthorized to inmates.
  - 2) Embracing and kissing are permitted within the bounds of good taste which would only be at the initial greeting and when leaving

the visiting area. Beyond this point, physical contact will not be permitted and will be grounds for termination of the visit. Limited physical contact is necessary to minimize the opportunity to introduce contraband into the institution and to maintain the orderly operation of the visiting room area.

- 3) Visitors may not bring pictures, packages or gifts of any type into the institution. For security reasons, lockers will only be made available for Legal or Official Visitors. Social visitors will not be provided locker keys. These visitors should limit their items to only those permitted in the visiting area. Items allowed to be brought into the visiting room are one small clear purse; money in denominations no larger than \$5.00 and not to exceed \$25.00; medication limited to the amount needed during the visiting period; two (2) diapers; baby wipes; one (1) change of infant clothing; two (2) baby bottles with contents; two (2) small sealed clear containers of baby food (no glass containers); and one (1) receiving blanket.
- 4) It is not permissible for papers of any kind to be examined or signed during social visits, nor may the visitor receive any items from the inmate. Such transactions must be handled via correspondence addressed to the inmate or approved by the Unit Team, Operations Lieutenant or the Duty Officer. Attorneys and approved attorney representatives may bring legal papers and written materials with them while visiting inmates and such documents may be examined and signed by the inmate. These legal materials may not be left with the inmate. A legal mail drop box is available only for attorneys in the front entrance.
- 5) An inmate's visitor may not leave money with any staff member for deposit in the inmate's commissary account.
- 6) Bringing any unauthorized items such as medication, weapons, tools, food, or drugs into the institution is a violation of institution regulations and the law. This infraction may result in the visitor's permanent removal from the visiting list and referral to the proper law enforcement agencies for prosecution.
- 7) It is a violation of law for visitors and inmates to introduce or attempt to introduce any unauthorized article onto the grounds or into this institution, to take or attempt to take, or to send or attempt to send any article from the institution without the knowledge and consent of the Warden or his duly appointed representative.

- 8) The unauthorized use of cameras or recording equipment without the consent of the Warden or his designee is strictly prohibited. Violators are subject to criminal prosecution.
- O. Supervision of Visits: Inmates are responsible for making certain that their visitors conduct themselves in a dignified manner. Inmates and their visitors are responsible for the behavior of their children. Visits not conducted in an appropriate manner will be terminated. The officers will not allow any articles to be passed between the inmate and the visitor. If there is any reasonable basis to suspect that materials are being passed, the visiting room officer may examine the item. The Operations Lieutenant will be consulted in questionable cases.
- P. Meals: Vending machines are provided in the visiting room and are stocked with various food and drink items. Inmates not wishing to terminate their visits in order to eat in their respective units can remain in the visiting room during meal times. Meals will not be saved in units by the unit officer for inmates out on social and legal visits and court schedules.
- Q. Interruption of Visit: Any inmate or visitor who departs from the visiting room will not be allowed to resume that visit on that day, unless authorized by a Lieutenant or the Duty Officer.
- R. Non-Smoking Area: The entire visiting room, to include attorney visiting areas, is designated as a non-smoking area.
- S. Penalty For Violation of Visiting Regulations:
- 1) Visit Terminations: The visiting room Officer-In-Charge (OIC) is to ensure visits are conducted in a quiet, orderly and dignified manner. Overall, he/she is responsible for the visiting room operations. The visiting room OIC will ensure that no one disrupts the good order of the visiting room. The OIC may terminate a visit that is not conducted in the appropriate manner. He/she may also remove a person from the area. If a visitor becomes disruptive, he/she must immediately contact the Operations Lieutenant or Duty Officer. This also pertains to legal or official visitors. The decision to further limit or terminate a visit for reasons of improper conduct by an inmate or visitors can be made by the Operations Lieutenant or Duty Officer.

Future visiting privileges may be denied as part of a disciplinary action brought against the inmate. Criminal prosecution may be initiated against the visitor, the inmate, or both, in cases of criminal

violations. Visiting room staff must have reasonable cause to detain a visitor.

Any staff may detain a visitor or any person who is found to be introducing or attempting to introduce such contraband as narcotics, intoxicants, lethal or poisonous chemicals or gases, guns, knives, or other weapons, or who is engaged in any other conduct which is a violation of law (including, but not limited to, actions which assist escape, such as possession of escape paraphernalia, or which induce riots), pending notification and arrival of appropriate law enforcement officials. The standard for such detention is a finding, based on probable cause, that the person has engaged in such a violation. Institutional staff should not interrogate suspects unless immediate questioning is necessary to protect the security of the institution or the life or safety of any person.

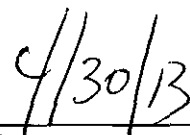
The Warden has the authority to restrict or suspend an inmate's regular visiting privileges temporarily when there is a reasonable suspicion that the inmate has acted in a way that would indicate a threat to the good order or security of the institution. Ordinarily, the duration of the restriction or suspension should be limited to the time required to investigate and initiate the discipline process.

- 2) Visit Denials: Any time a visit is denied or terminated, the Visit Denial Memorandum Form (Attachment I), will be completed by respective staff. It will be signed by a Lieutenant or Duty Officer and forwarded to the Captain.

5. OFFICE OF PRIMARY RESPONSIBILITY : Correctional Services



\_\_\_\_\_  
W.T. Taylor, Warden



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Date

**Social/Legal Visiting at FDC Miami**

Welcome to the Federal Detention Center Miami, Florida. The Federal Detention Center encourages social visiting that helps to enhance family and community relationships of inmates. However, all parties are reminded that the mission of this institution is to facilitate trial preparation. Therefore, inmates must have an appropriate amount of time with legal counsel to prepare for their court appearance. Consequently, legal visits will always receive priority over social visits. Social visiting is scheduled based on the housing unit the inmate is assigned to. Below is a list of the visiting hours and days for each housing unit:

| Housing Unit | Visiting Days/Hour  |
|--------------|---|
| 5-East       | Saturday 5:00 p.m. – 7:00 p.m.<br>Tuesday 9:30 a.m. – 11:30 a.m. (1 hour)   |
| 5-West       | Sunday 5:00 p.m. 7:00 p.m.<br>Friday 9:30 a.m. – 11:30 a.m. (1 hour)  |
| 6-Unit       | (6-WEST)<br>Saturday 5:00 p.m. - 7:00 p.m. (1 hour)<br>(6-EAST)<br>Sunday 5:00 p.m. - 7:00 p.m. (1 hour)<br>Monday and Thursday No Visits<br>Tuesday 5:00 p.m. - 9:00 p.m. (4 hours)<br>Wednesday 7:00 p.m. - 9:00 p.m. (2 hours)<br>Friday 5:00 p.m. - 7:00 p.m. (2 hours) |
| 7- East      | Sunday 7:00 a.m. - 9:00 a.m.<br>Thursday 9:30 a.m. - 11:30 a.m. (1 hour)  |
| 7-West       | Monday 9:30 a.m. - 11:30 a.m.<br>Saturday 7:00 a.m. - 9:00 a.m. (1 hour)  |
| 8-East       | Monday 9:30 a.m. - 11:30 a.m.<br>Saturday 7:00 a.m. - 9:00 am (1 hour)  |
| 8-West       | Monday 12:00 p.m. - 3:00 p.m.<br>Saturday 9:30 a.m. - 11:30 a.m. (1 hour)   |
| 9-East       | Sunday 12:00 p.m. - 3:00 p.m.<br>Friday 7:00 a.m. - 9:00 a.m. (1 hour)  |
| 9-West       | Tuesday 7:00 a.m. - 9:00 a.m.<br>Saturday 12:00 p.m. - 3:00 p.m. (1 hour)   |
| 10-East      | Thursday 5:00 p.m. - 8:00 p.m.<br>Sunday 7:00 a.m. - 9:00 a.m. (1 hour)   |
| 10-West      | Wednesday 5:00 p.m. - 7:00 p.m.<br>Saturday 7:00 a.m. - 9:00 a.m. (1 hour)  |
| 11-East      | Sunday 7:00 p.m. - 9:00 p.m.<br>Friday 12:00 p.m. - 3:00 p.m. (1 hour)  |
| 11-West      | Tuesday 12:00 p.m. - 3:00 p.m.<br>Saturday 7:00 p.m. - 9:00 p.m. (1 hour)   |

Monday from 7:00 pm - 9:00 pm and Wednesday from 7:00 am - 5:00 pm, visiting is reserved for Legal Visits only.

Inmates housed in the Special Housing Unit will have social visits on Mondays between the hours of 7:00 am to 9:00 am or 5:00 pm to 7:00 pm, for one (1) hour. These visits will be conducted in the visiting room, unless otherwise instructed. There will be no social visiting on weekends. If the visit is conducted in the Special Housing Unit, minors will not be allowed.

**Visiting Limitations:** One hour of visiting is authorized each visiting day. Three visitors will be allowed to visit at one time. Infants and toddlers who are held at all times are not counted as a visitor. Each inmate is authorized four (4) hours of social visiting per month. Inmates designated to Unit 6 (Cadre inmates) will not be charged points for social visiting.

Valid governmental identification is required for all visitors starting at age 16. All visitors must clear a walk-through or hand-held metal detector prior to entering the institution. Processing will begin thirty (30) minutes prior to each visiting session.

**Dress code:** All visitors are expected to wear appropriate attire when in the institution. Shoes are required, except for infants.

The following items are strictly prohibited:

- Shorts of any length (except for children up to age 7)
- Sleeveless garments (except for children up to age 7)
- Sweat pants, sweat shirts, sun dresses, leotards, wrap around skirts, crop tops, low cut blouses, zippered dresses/shirts, button down dresses/skirts or low cut dresses.
- Halter tops, bathing suits or backless tops.
- Hats, caps, headbands, head scarfs, hooded garments, wigs, hairpieces and sunglasses.
- Spandex pants, tights or clothing with revealing holes.
- No extra clothing, outer garments, overcoats, jackets or windbreakers.
- Any clothing similar to that issued to staff or inmates ( Khaki, orange, green military fatigue, and plain white t shirts) or staff uniforms.



- Any type of garment that is see through.
- Under garments and brassieres are required.
- Clothing that is tight and sexually suggestive or revealing.
- Any other clothing item (s) determined to be inappropriate by staff which would interfere with the orderly running of the institution will not be permitted.

**Items allowed:** Small clear purse; money (in denominations no larger than \$5.00 and not to exceed \$25.00); medication limited to the amount needed during the visiting period; two (2) diapers; baby wipes; one (1) change of infant clothing; two (2) baby bottles with contents; two (2) small sealed clear containers of baby food (no glass containers); and, one (1) receiving blanket. No cups.

**Items not allowed on premises:** Strollers; carriers; diaper bags; food; yellow highlighter markers; newspapers; magazines; cameras; cellular phones; or any other electronic/recording communications devices. Food and beverages are not allowed in the front lobby. Vending machines are available in the visiting room.

**Visiting conduct:** Upon entering/exiting the visiting area, the inmate and visitor will be allowed to embrace and kiss. Any other physical contact will not be tolerated and will be considered grounds for terminating the visit. Inmates are responsible for their visitors conduct once on the premises. Any disruptive behavior from a visitor (profanity, vulgar actions etc.) will be grounds for termination of visiting privileges. Failure to leave the premises when ordered may result in you being detained, arrested or prosecuted. It is a federal crime to introduce weapons to include pocket knives, drugs or other contraband into the institution.

**Federal Detention Center**  
 33 NE 4th Street  
 Miami, Florida 33132-2112

INMATE NAME: \_\_\_\_\_ REG. NO.: \_\_\_\_\_

UNIT: \_\_\_\_\_ DATE SUBMITTED: \_\_\_\_\_

**VISITING LIST**

Only immediate family members with the same last name will be approved for visitation. Immediate family members are identified as follows: parents, brothers, sisters, children, and legal spouse. Immediate family members with different last names will require proof of relationship prior to approval. Children under (18) years of age do not have to be included on your list, but will not be permitted to visit unless escorted by an approved adult. Any visitor with a criminal record must have prior written approval from the Warden.

NOTE: The initial visiting list must be completed while assigned to this unit. No changes will be allowed on your initial list for the first (90) days. All the information must be printed. All information must be completed for each visitor, or the form will be returned to you for completion. Any false information may result in disciplinary action and loss of your visiting privileges. Your authorized social visit will consist of one hour of visiting each authorized visiting day. You will be allowed (4) hours total visiting per month. See your unit counselor for information or questions.

**Inmate Visitor Information**

**Approved/Denied**

|               |                    |         |  |
|---------------|--------------------|---------|--|
| FULL NAME:    |                    |         |  |
| RELATIONSHIP: |                    |         |  |
| ADDRESS       | CITY               | STATE:  |  |
| ZIP           | TELEPHONE #<br>( ) | SSN     |  |
| D.O.B:        | SEX:               | HEIGHT: |  |
| WEIGHT:       | RACE:              |         |  |

|               |                    |         |  |
|---------------|--------------------|---------|--|
| FULL NAME:    |                    |         |  |
| RELATIONSHIP: |                    |         |  |
| ADDRESS       | CITY               | STATE:  |  |
| ZIP           | TELEPHONE #<br>( ) | SSN     |  |
| D.O.B:        | SEX:               | HEIGHT: |  |
| WEIGHT:       | RACE:              |         |  |

|               |                    |         |  |
|---------------|--------------------|---------|--|
| FULL NAME:    |                    |         |  |
| RELATIONSHIP: |                    |         |  |
| ADDRESS       | CITY               | STATE:  |  |
| ZIP           | TELEPHONE #<br>( ) | SSN     |  |
| D.O.B:        | SEX:               | HEIGHT: |  |
| WEIGHT:       | RACE:              |         |  |

|               |                    |         |  |
|---------------|--------------------|---------|--|
| FULL NAME:    |                    |         |  |
| RELATIONSHIP: |                    |         |  |
| ADDRESS       | CITY               | STATE:  |  |
| ZIP           | TELEPHONE #<br>( ) | SSN     |  |
| D.O.B:        | SEX:               | HEIGHT: |  |
| WEIGHT:       | RACE:              |         |  |

|               |                    |         |  |
|---------------|--------------------|---------|--|
| FULL NAME:    |                    |         |  |
| RELATIONSHIP: |                    |         |  |
| ADDRESS       | CITY               | STATE:  |  |
| ZIP           | TELEPHONE #<br>( ) | SSN     |  |
| D.O.B:        | SEX:               | HEIGHT: |  |
| WEIGHT:       | RACE:              |         |  |

|               |                    |         |  |
|---------------|--------------------|---------|--|
| FULL NAME:    |                    |         |  |
| RELATIONSHIP: |                    |         |  |
| ADDRESS       | CITY               | STATE:  |  |
| ZIP           | TELEPHONE #<br>( ) | SSN     |  |
| D.O.B:        | SEX:               | HEIGHT: |  |
| WEIGHT:       | RACE:              |         |  |

|               |                    |         |  |
|---------------|--------------------|---------|--|
| FULL NAME:    |                    |         |  |
| RELATIONSHIP: |                    |         |  |
| ADDRESS       | CITY               | STATE:  |  |
| ZIP           | TELEPHONE #<br>( ) | SSN     |  |
| D.O.B:        | SEX:               | HEIGHT: |  |
| WEIGHT:       | RACE:              |         |  |

Correctional Counselor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

BP-A0629  
 APR 10  
 U.S. DEPARTMENT OF JUSTICE

VISITOR INFORMATION CDFRM

FEDERAL BUREAU OF PRISONS

|                                      |             |      |
|--------------------------------------|-------------|------|
| Addressee                            | Institution | Date |
| Re: (Inmate's Name and Register No.) |             |      |

Dear \_\_\_\_\_:

I am requesting that you be included among my approved visitors. In order to establish your suitability as a visitor, it may be necessary for institution officials to send an inquiry to an appropriate law enforcement or crime information agency to ascertain whether or not placing you on my visiting list would present a management problem for the institution, or have other possible adverse effects. The information obtained will be used to determine your acceptability as a visitor. The Bureau of Prisons' authority to request background information on proposed visitors is contained in Title 18 U.S.C. § 4042.

In order for you to be considered for the visiting privilege with me, it will be necessary for you to fill out the questionnaire and release form below and return it to the following address: (Institution address).

You are not required to supply the information requested. However, if you do not furnish the information, the processing of your request will be suspended, and you will receive no further consideration. If you furnish only part of the information required, the processing of your request may be significantly delayed. If the information withheld is found to be essential to the processing of your request, you will be informed, and your request will receive no further consideration unless you supply the missing information. Although no penalties are authorized if you do not supply the information requested, failure to supply such information could result in your not being considered for admittance as a visitor. The criminal penalty for making false statements is a fine of not more than \$250,000 or imprisonment for not more than five years or both (See 18 U.S.C. § 1001).

Sincerely,

|   |  |  |                                 |
|---|--|--|---------------------------------|
| 1. Legal Name   |  | 2. Date of Birth   | 3. Address (Including Zip Code) |
| 4. Telephone Number (Including Area Code)   |  | 5. Race and Sex of Visitor   |                                 |
| 6. Are you a U.S. Citizen?<br>___ Yes ___ No  |  | 6a. If yes, provide Social Security No: _____<br>6b. If no, provide Alien Registration No: _____<br>6c. Provide Passport No: _____ |                                 |
| 7. Relationship to above-named inmate   |  | 8. Do you desire to visit him/her?<br>___ Yes ___ No   |                                 |
| 9. Did you know this person prior to his/her current incarceration? ___ Yes ___ No  |  |  |                                 |
| 10. If the answer to #9 is yes, indicate the length of time you have known this person and where the relationship developed.  |  |  |                                 |
| 11. Have you ever been convicted of a crime? If so, state the number, date, place, and nature of the conviction/s:  |  |  |                                 |
| 12. Are you currently on probation, parole, or any other type of supervision? If so, state the name of your supervising probation/parole officer and the address and telephone no. where he/she can be contacted: |  |  |                                 |
| 13. Do you correspond or visit with other inmates? If so, indicate the individual(s) and their location(s):   |  |  |                                 |
| 14. Driver's License No. and State of Issuance  |  |  |                                 |

AUTHORIZATION TO RELEASE INFORMATION

I hereby authorize release to the Warden of: \_\_\_\_\_ any record of criminal offenses for which I have been arrested and convicted, and any information related to those convictions.

Signature for Authorization to Release Information \_\_\_\_\_ (Sign and Print Name) Parent or Guardian

(If applicant is under 18 years of age, signature of parent or guardian indicates consent of minor to visit inmate).

If additional space is required, you may use the back of this form. To be filed in Inmate Central File, FOI Section 2

PDF

Prescribed by P5267

Replaces BP-A629 of Sep 00

FILE IN SECTION 3 UNLESS APPROPRIATE FOR PRIVACY FOLDER

SECTION 3

BP-A0629  
#13

INFORMACIÓN DE VISITANTE CDFRM

DEPARTAMENTO DE JUSTICIA DE EE.UU.

AGENCIA FEDERAL DE PRISIONES

\*\*This template is provided to assist Spanish-speaking inmates who are not fluent in English to complete the corresponding Bureau form. It is a template only for instructional purposes, and should not be filled in. \*\*

\*\*Este modelo se provee para ayudarle a los reos que hablan español y no dominan el inglés a que completen el formulario correspondiente de la Agencia. Es solo un modelo que sirve como ejemplo, y no se debe completar.\*\*

Destinatario

Institución

Fecha

Asunto: (Nombre del Reo y Número de Registro)

Estimado/a

He pedido que usted sea incluido/a entre mis visitantes aprobados. Para establecer lo apropiado que es que usted sea un visitante, pueda ser necesario que los oficiales de la institución envíen un formulario de investigación a una agencia apropiada de orden público o de información de crímenes para determinar si el colocarle en mi lista de visitantes presentaría un problema de administración para la institución, u otros posibles efectos adversos. La información obtenida se usará para determinar su aceptación como un visitante. La autoridad de La Agencia Federal de Prisiones para solicitar información de antecedentes de los visitantes propuestos se encuentran en Título 18 U.S.C. § 4042.

Para que usted sea considerado para obtener el privilegio de visitarme, es necesario que usted complete el cuestionario y el formulario de autorización a continuación y que lo devuelva a la siguiente dirección: (Dirección de la institución).

Usted no está obligado/a a proveer la información solicitada. Sin embargo, si usted no provee la información, el procesamiento de su solicitud se suspenderá, y no recibirá ninguna consideración adicional. Si usted provee sólo parte de la información requerida, el procesamiento de su solicitud puede demorarse considerablemente. Si se determina que la información no divulgada es esencial para el procesamiento de su solicitud, usted será notificado, y su solicitud no recibirá ninguna consideración adicional, a menos que usted provea la información que hace falta. Aunque no hay penalidades autorizadas en caso que usted no provee la información solicitada, el no proveer tal información podría resultar en que usted no sea considerado para ser admitido como un visitante. La penalidad criminal por hacer declaraciones falsas es una multa de no más de \$250,000 o encarcelamiento de no más de cinco años, o ambos (Vea 18 U.S.C. § 1001).

Sinceramente,

1. Nombre Legal
2. Fecha de Nacimiento
3. Dirección (Incluyendo Código Postal)
4. Número Telefónico (Incluyendo Código de la Zona)
5. Raza y Sexo del Visitante
6. ¿Es usted Ciudadano Estadounidense?  
Si No
- 6a. De ser así, supla su número de Seguro Social:
- 6b. De no ser así, supla su número de Registro de Inmigración:
- 6c. Supla su número de Pasaporte:
7. Relación al reo nombrado arriba
8. ¿Desea usted visitarlo/a?  
Si No
9. ¿Conocía usted a esta persona antes de su encarcelación actual? Sí No
10. Si la respuesta a #9 es Sí, indique cuanto tiempo usted ha conocido a esta persona y de donde se desarrolló esta relación.
11. ¿Alguna vez a sido declarado culpable de un crimen? De ser así, declare cuantas veces, la/s fecha/s, el/los lugar/es, y la razón por la/s condena/s:
12. ¿Está usted actualmente bajo libertad bajo probatoria, libertad condicional, o cualquier otro tipo de supervisión? De ser así, supla el nombre de su oficial de supervisión de libertad condicional u oficial de libertad condicional y la dirección y número de teléfono donde el/ella puede ser localizado/a:
13. ¿Se corresponde o visita a otros reos? De ser así, indique el/los individuo/s y donde se encuentra/n:
14. Número de Licencia para Conducir y el Estado Emisor

AUTORIZACIÓN PARA DISTRIBUIR INFORMACIÓN

Yo, por la presente, autorizo la distribución al Warden de: (Institución, Lugar) cualquier archivo criminal de ofensas por las cuales he sido arrestado/a y condenado/a, y cualquier información pertinente a esas condenas.

Firma para la Autorización para Distribuir Información (Firme y Nombre Escrito) Padre o Guardián (Si el solicitante es menor de 18 años, la firma de un padre o guardián indica el consentimiento a la visita de un menor de edad.)

Si requiere espacio adicional, puede usar el dorso de este formulario. Para ser archivado en la Sección 2 de FOI en el Expediente Central del Reo

PDF

Prescribed by PS 5267

Reemplaza BP-A629 fechado Sept. 00

ARCHÍVELO EN LA SECCIÓN 3 A MENOS QUE SEA APROPIADO PARA EL ARCHIVO DE INFORMACIÓN PRIVADA

SECCIÓN 3



**U.S. Department of Justice  
Federal Bureau of Prisons  
Federal Detention Center**

33 NE 4<sup>th</sup> Street  
Miami, FL 33132

Date

**MEMORANDUM FOR** \_\_\_\_\_, AW(P)

**FROM:** \_\_\_\_\_, Unit Manager

**SUBJECT: Special Visiting Privileges**

\_\_\_\_\_  
APPROVED

\_\_\_\_\_  
DISAPPROVED

I have authorized inmate \_\_\_\_\_, Reg. No. \_\_\_\_\_  
assigned to unit \_\_\_\_\_ to have visiting privileges with the below  
listed person(s) on the following date(s):

| Visitor's Name | Address | Relationship |
|----------------|---------|--------------|
|                |         |              |
|                |         |              |
|                |         |              |
|                |         |              |

The above visit is approved for the follow reasons: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This authorization is valid only for the day listed above and is subject to normal rules and regulations regarding visiting.

cc: Central File  
Front Lobby Officer  
Control Center

BP-A0243  
SEPT 10

APPLICATION TO ENTER INSTITUTION AS REPRESENTATIVE CDFRM

U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS

GENERAL

This information is provided pursuant to Public Law 93 - 579, the Privacy Act of December 31, 1974.

PURPOSES AND USES

The information you supply may be used as a basis for an investigation regarding your correspondence with \_\_\_\_\_ and admission to visit this person at \_\_\_\_\_. In the process of conducting the investigation, the Bureau of Prisons may disclose the information to federal, state, or local law enforcement agencies.

EFFECTS OF NONDISCLOSURE

You are not required to supply the information requested on the attached form. If you do not furnish the information requested, the processing of your request will be suspended, and you will receive no further consideration. If you furnish only part of the information required, the processing of your request will be attempted; however, it may be significantly delayed. If the information withheld is found to be essential to processing your request properly, you will be so informed, and your request will receive no further consideration unless you supply the missing information. Although no penalties are authorized for failure to supply the requested information, failure to supply the information could result in your not being considered for or allowed admittance to the institution or correspondence privileges with the inmate in question.

APPLICATION TO ENTER INSTITUTION AS THE REPRESENTATIVE OF A LICENSED ATTORNEY OR TO CORRESPOND WITH A FEDERAL PRISONER AS THE REPRESENTATIVE OF A LICENSED ATTORNEY

This form has three parts:

1. Questionnaire : The questionnaire is to be completed by each paralegal employee, legal assistant, clerk or student who seeks to enter an institution of Federal Bureau of Prisons as the representative of a licensed attorney to visit a federal prisoner or to correspond with a federal prisoner as the attorney's representative.
2. Certification : The person seeking to enter a federal institution or to visit or correspond with a federal prisoner must sign the certification which follows the questionnaire.
3. Attorney's Statement : The licensed attorney must sign this statement.

**QUESTIONNAIRE**

(NOTE: Answer all questions. If a question does not apply to you, write "Not Applicable" in the space provided for the answer.)

1. Name: \_\_\_\_\_

2. a. Any alias or other name ever used: \_\_\_\_\_

Name: \_\_\_\_\_ When used: \_\_\_\_\_

Name: \_\_\_\_\_ When used: \_\_\_\_\_

b. Date of Birth: \_\_\_\_\_

3.

a. Present Address: \_\_\_\_\_

b. How long at this address? \_\_\_\_\_

c. List all previous addresses (Including Street and Number, City and State) for the last five years and dates you resided at each address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4.

a. Present place of employment: \_\_\_\_\_

b. Name of immediate supervisor: \_\_\_\_\_

c. Employer's business address: \_\_\_\_\_

d. Employer's business phone: \_\_\_\_\_

e. List all previous employers for the past five years, including employer's addresses and dates of your employment with each employer:

| <u>Employer</u> | <u>Address</u> | <u>Dates of Employment</u> |
|-----------------|----------------|----------------------------|
| _____           | _____          | _____                      |
| _____           | _____          | _____                      |
| _____           | _____          | _____                      |

5. List all schools, universities, or other educational institutions attended from grade 10 to present (This should include any and all legal training that you have received):

| <u>School</u> | <u>Address</u> | <u>Degree and date received</u> |
|---------------|----------------|---------------------------------|
| _____         | _____          | _____                           |
| _____         | _____          | _____                           |

6. Have you ever been convicted of ANY criminal offense? If so, complete the following. You may exclude any convictions for minor traffic violations (fine of \$50 or less).

| <u>Offense</u> | <u>Date of Conviction</u> | <u>Name, Location of Court</u> |
|----------------|---------------------------|--------------------------------|
| _____          | _____                     | _____                          |
| _____          | _____                     | _____                          |

7. Have you ever been confined in any jail, prison or penal institution? If so, complete the following:

| <u>Type of Institution</u><br>(State, Federal, Municipal, County) | <u>Location</u> | <u>Dates of Confinement</u> |
|---|-----------------|-----------------------------|
| _____   | _____           | _____                       |
| _____   | _____           | _____                       |



8. Have you ever been denied permission to visit or correspond with any inmate by an institution within the Federal Bureau of Prisons? \_\_\_\_\_ If so, which institutions, with which inmate, and when?

9. Are you a citizen of the United States? \_\_\_\_\_ If not, give the name of the country of which you are a citizen or subject. \_\_\_\_\_

**STATEMENT OF APPLICANT SEEKING TO ENTER AN INSTITUTION TO VISIT OR TO CORRESPOND WITH A FEDERAL AS THE REPRESENTATIVE OF A LICENSED ATTORNEY**

I certify that I am authorized to act as the legal representative of \_\_\_\_\_, who is a licensed member of the bar of the State of \_\_\_\_\_. I request that I be allowed to interview and correspond with \_\_\_\_\_, who is confined at \_\_\_\_\_. I am aware of my responsibility as a representative of the above-named attorney and certify that I am able to meet this responsibility. I am also aware of the Bureau of Prison's Policy on Inmate Legal Activities and certify that I am able to and will adhere to the requirements of this policy. I pledge to abide by Bureau of Prisons regulations and Institution guidelines.

I hereby certify that all of the information contained in this questionnaire is true and correct to the best of my knowledge. Furthermore, I understand that all information contained in this questionnaire may be investigated and verified through the use of federal, state, and local authorities. Applicant's printed name: \_\_\_\_\_

Applicant's signature: \_\_\_\_\_

Date completed: \_\_\_\_\_

**STATEMENT OF SPONSORING ATTORNEY**

I hereby certify that I am a licensed member of the bar of the State of \_\_\_\_\_ and that I employ or supervise \_\_\_\_\_. I authorize \_\_\_\_\_ to represent me and request that as my representative he/she be allowed to interview and correspond with \_\_\_\_\_ who is currently confined at \_\_\_\_\_. I further certify that \_\_\_\_\_ is aware of the responsibility of his/her role as my representative and is able to meet this responsibility. I pledge that I will supervise my representative's activities. I accept personal and professional responsibility for all acts of my representative which affect the institution, its inmates or staff.

Attorney's printed name: \_\_\_\_\_

Attorney's signature: \_\_\_\_\_

Date completed: \_\_\_\_\_

BP-A0224  
JUNE 10

NOTIFICATION TO VISITOR CDFRM

U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Officer's Name: \_\_\_\_\_  
Institution: \_\_\_\_\_ Location: \_\_\_\_\_  
Name of Inmate To Be Visited: \_\_\_\_\_ Register No.: \_\_\_\_\_

**NOTICE TO ALL PERSONS: CONSENT TO SEARCH**

Federal Bureau of Prisons (Bureau) staff may search you and your belongings (bags, boxes, vehicles, container in vehicles, jackets, coats, etc.) before you enter, or while you are on or inside, Bureau grounds or facilities.

**Consent to Search Implied.** By entering or attempting to enter Bureau grounds or facilities, you consent to being searched in accordance with Bureau policy and Federal regulations in volume 28 of the Code of Federal Regulations, Part 511. If you refuse to be searched, you may be prohibited from entering Bureau grounds or facilities.

**NOTICE TO ALL PERSONS: PROHIBITED ACTIVITIES AND OBJECTS**

You are prohibited from engaging in prohibited activities or possessing prohibited objects on Bureau grounds, or in Bureau facilities, without the knowledge and consent of the Warden. Violators may be detained or arrested for possible criminal prosecution, either by Bureau staff, or local or federal law enforcement authorities.

**Prohibited Activities** include any activities that could jeopardize the Bureau's ability to ensure the safety, security, and orderly operation of Bureau facilities, and protect the public, including, but not limited to, violations of Titles 18 and 21 of the United States Code, Federal regulations, or Bureau policies.

**Prohibited Objects** include, but are not limited to, weapons; explosives; drugs; intoxicants; currency; cameras of any type; recording equipment; telephones; radios; pagers; electronic devices; and any other objects that violate criminal laws or are prohibited by Federal regulations or Bureau policies.

**PLEASE ANSWER THE FOLLOWING QUESTIONS:** Are any of the following items in your possession, or in possession of children in your party under 16 years of age?

|                     |                |                     |                |
|---------------------|----------------|---------------------|----------------|
| Tobacco Products    | Yes ___ No ___ | Narcotics           | Yes ___ No ___ |
| Explosives          | Yes ___ No ___ | Marijuana           | Yes ___ No ___ |
| Weapons             | Yes ___ No ___ | Camera              | Yes ___ No ___ |
| Ammunition          | Yes ___ No ___ | Food Items          | Yes ___ No ___ |
| Metal Cutting tools | Yes ___ No ___ | Alcoholic Beverages | Yes ___ No ___ |
| Recording Equipment | Yes ___ No ___ | Prescription Drug*  | Yes ___ No ___ |
| Telephones-any type | Yes ___ No ___ | Intoxicants         | Yes ___ No ___ |
| Radios              | Yes ___ No ___ | Pagers              | Yes ___ No ___ |
| Electronic Devices  | Yes ___ No ___ | Firearms            | Yes ___ No ___ |

\*All types of medication carried must be listed in the following space, and must be left at the entry area:

I have read, I understand, and I agree to the above. If I am visiting with an inmate, I also understand and agree to abide by the visiting guidelines provided me by this institution. I declare that I do not have articles in my possession which I know to be a threat to institution safety, security, or good order. I am aware that if I have questions about what is authorized, I should consult with the officer. I am aware that the penalty for making a false statement is a fine of not more than \$250,000 or imprisonment of not more than five years or both (pursuant to 18 U.S.C. § 1001). I am aware that the visiting area, including restrooms in the visiting area, may be monitored to ensure institution security and good order.

Printed Name/Signature: \_\_\_\_\_

Street Address/City and State: \_\_\_\_\_

Vehicle License No.: \_\_\_\_\_ Year, Color, Make and Model of Vehicle: \_\_\_\_\_

If visiting with an inmate, please complete the following: Names of children under 16 years of age for whom I am responsible: \_\_\_\_\_

If not visiting with an inmate, please indicate:

Name of Organization: \_\_\_\_\_ Purpose of Visit: \_\_\_\_\_

Printed Name/Signature of Staff Witness: \_\_\_\_\_

FILE IN SECTION 3 UNLESS APPROPRIATE FOR PRIVACY FOLDER

**SECTION 3**

BP-A0224  
JUNIO 10

NOTIFICACIÓN AL VISITANTE CDFRM

DEPARTAMENTO DE JUSTICIA DE EE.UU.

AGENCIA FEDERAL DE PRISIONES

**\*\*This template is provided to assist Spanish-speaking inmates who are not fluent in English to complete the corresponding Bureau form. It is a template only for instructional purposes, and should not be filled in. \*\***

**\*\*Este modelo se provee para ayudarle a los reos que hablan español y no dominan el inglés a que completen el formulario correspondiente de la Agencia. Es solo un modelo que sirva como ejemplo, y no se debe completar.\*\***

Fecha: Hora: Nombre del Oficial:  
Institución: Sitio:  
Nombre del Reo a Quien Visita: Número de Registro:

**NOTA A LAS TODAS PERSONAS: CONSENTIMIENTO A REGISTRO**

El personal de la Agencia Federal de Prisiones (Agencia) puede registrarlo a usted y a sus pertenencias (bolsas, cajas, vehículos, contenedores, abrigos, etc.) antes de entrar, o mientras usted esté en o adentro de, los terrenos o las instalaciones de la Agencia.

Consentimiento a Registro Sobreentendido Al entrar o intentar entrar a los terrenos o las instalaciones de la Agencia, usted consiente a ser registrado de acuerdo con la política de la Agencia y los Reglamentos Federales del volumen 28 del Código de Reglamentos Federales, Parte 511. Si usted se niega a ser registrado, usted puede ser vedado de entrar a los terrenos o las instalaciones de la Agencia.

**NOTA A TODAS LAS PERSONAS: ACTIVIDADES Y OBJETOS PROHIBIDOS**

A usted le es prohibido participar en actividades prohibidas o poseer objetos prohibidos en los terrenos de la Agencia, o en las instalaciones de la Agencia, sin el conocimiento y el consentimiento del Warden. Los violadores de esta regla pueden ser detenidos o arrestados para una posible acción judicial, ya sea por el personal de la Agencia, o por las autoridades de orden público locales o federales.

Actividades Prohibidas incluyen cualquier actividad que pondría en peligro la capacidad de la Agencia para asegurar la seguridad, la protección, y el funcionamiento ordenado de las instalaciones de la Agencia y proteger al público, incluyendo, pero no limitada a las violaciones de los Títulos 18 y 21 del Código de Leyes de EE.UU., los reglamentos Federales, o las políticas de la Agencia.

Objetos Prohibidos incluyen, pero no se limitan a, las armas; los explosivos; las drogas; las sustancias embriagantes; el dinero; las cámaras de cualquier tipo; los equipos de grabación; los teléfonos; los radios; los biperes; los aparatos electrónicos; y cualquier otro objeto que viola las leyes criminales o el cual es prohibido por los reglamentos Federales o por las políticas de la Agencia.

**POR FAVOR CONTESTE LAS SIGUIENTES PREGUNTAS:** ¿Posee usted o algún niño en su grupo menor de 16 años alguno de los siguientes artículos?

|                                |    |    |                         |    |    |
|--------------------------------|----|----|-------------------------|----|----|
| Productos de Tabaco            | Sí | No | Drogas                  | Sí | No |
| Explosivos                     | Sí | No | Marihuana               | Sí | No |
| Armas                          | Sí | No | Cámara                  | Sí | No |
| Municiones                     | Sí | No | Artículos de Comida     | Sí | No |
| Herramientas para Cortar Metal | Sí | No | Bebidas Alcohólicas     | Sí | No |
| Equipo de Grabación            | Sí | No | Droga Recetada*         | Sí | No |
| Teléfono - cualquier tipo      | Sí | No | Sustancias embriagantes | Sí | No |
| Radios                         | Sí | No | Biperes                 | Sí | No |
| Aparatos Electrónicos          | Sí | No | Armas de Fuego          | Sí | No |

\*Todo medicamento en su posesión debe ser declarado en el siguiente espacio y dejado en la entrada.

Yo he leído, entiendo, y estoy de acuerdo con lo anterior dicho. Si visito a un reo, también entiendo y acuerdo a cumplir con las normas de visita que esta institución me provee. Yo declaro que no tengo artículos en mi posesión de los cuales yo se que son una amenaza a la seguridad, la protección, o el funcionamiento ordenado de la institución. Yo soy consciente de que si tengo preguntas sobre lo que está autorizado, debo consultar con el oficial. Yo soy consciente de que la penalidad por hacer una declaración falsa es una multa de no más de \$250,000 o encarcelamiento de no más de cinco años, o ambos (de acuerdo con 18 U.S.C. § 1001). Yo soy consciente de que el área de visita, incluyendo los baños en el área de visita, pueden ser monitoreados para asegurar la seguridad y el funcionamiento ordenado de la institución.

Nombre Impreso/ Firma:  
Dirección/Ciudad y Estado:  
Número de Placa de Vehículo: Año, Color, Marca y Modelo del Vehículo:

Si está visitando a un reo, por favor complete lo siguiente: Nombre de los niños menores de 16 años de edad por quienes yo soy responsable:

Si no está visitando a un reo, por favor indique:  
Nombre de Organización: Propósito de la Visita:  
Nombre Impreso/ Firma del Testigo del Personal:

)

ARCHÍVELO EN LA SECCIÓN 3, A MENOS QUE SEA  
APROPIADO PARA EL ARCHIVO DE INFORMACIÓN PRIVADA.

**SECCIÓN 3**

PDF

Recommendado porP526

Reemplaza BP-224(52) fechado Mayo 99

## VISITOR INFORMATIONAL MAP

### *DIRECTIONS FROM HIGHWAY 836 TO THE FEDERAL DETENTION CENTER:*

- \* Stay on 836 East, pass the toll plaza, continue straight when 95 splits off. 836 East will turn into 395 to Beaches.
  - \* Take 395 to the very first left exit (2nd Ave), pass the 95 exit.
  - \* Make a right at the bottom of the exit ramp onto NE 2nd Ave.
  - \* Make a right on NE 6th St., go two blocks, then make a left onto N. Miami Ave.
  - \* The institution will be on the corner of N. Miami Ave. & 4th St.
- \* There are several public parking lots available within walking distance to the institution at a minimal charge.

## **VISITOR TRANSPORTATION INFORMATION**

**Federal Detention Center  
33 NE Fourth Street  
Miami, Florida 33130  
(305)577-0010**

The following information is to assist visitors in locating and procuring transportation to and from the Federal Detention Center in Miami. FDC, Miami is located in downtown Miami on the corner of NE Fourth Street and N Miami Avenue.

1. Taxicabs: There are numerous taxicab companies serving the Miami Dade area. Below is a list of several taxicab companies:

|              |          |              |          |
|--------------|----------|--------------|----------|
| Eights Cab   | 888-8888 | Central Cab  | 532-5555 |
| Kendall Taxi | 388-8888 | Key American | 361-1355 |
| Lakes Cab    | 820-3333 |              |          |
| Miami Beach  | 899-9999 |              |          |

2. Airlines: Miami is served by several major airlines. Miami International Airport is located approximately 7 miles west of downtown Miami.

|             |              |           |              |
|-------------|--------------|-----------|--------------|
| American    | 800-433-7300 | Northwest | 800-255-2525 |
| TWA         | 305-371-7471 | United    | 800-241-6522 |
| Continental | 305-871-1400 | US Air    | 800-842-5374 |
| Delta       | 305-448-7000 |           |              |

3. Bus service: Greyhound has a bus station located at 700 Biscayne Blvd., Miami. Telephone information can be reached at: 305-374-7222 and in Spanish at: 800-531-5332.



**U.S. Department of Justice  
Federal Bureau of Prisons  
Federal Detention Center**

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33 NE 4<sup>th</sup> Street  
Miami, FL 33132

**DATE:**

**REPLY TO**

**ATTN OF:** \_\_\_\_\_, Staff

**SUBJECT: VISIT DENIAL**

**TO:** \_\_\_\_\_, Captain

The below listed visitor(s) was/were denied visiting or had their visit terminated for the following reason(s):

- \_\_\_\_\_ 1. Improper Dress
- \_\_\_\_\_ 2. Not on Visiting List
- \_\_\_\_\_ 3. Wrong Visiting Day
- \_\_\_\_\_ 4. Second visit on the Same Day \_\_\_\_\_
- \_\_\_\_\_ 5. Other (explain) \_\_\_\_\_

Visitor's Name:

Inmate's Name:

Inmate's Reg. No.:

Notification/Approved:

Lt. or Duty Officer Signature: \_\_\_\_\_