



**Yakima Air Terminal-McAllister Field**  
*Airport ID Badge New Application Form*

## **Instructions**

### **Airport Badge Types**

- **AOA Badge** – All individuals who require regular and routine access to the Airport Operations area (AOA), which includes all areas of the airport inside the perimeter fencing except the “SIDA” area, must obtain an AOA badge.
- **SIDA Badge** – The SIDA (Security Identification Display Area) Badge is required for all persons who have an operational need to access the Secured Areas surrounding the commercial passenger terminal. This badge is primarily issued to airline personnel, TSA personnel and Airport Staff.

### **Application Process**

- Applicants must complete Section 1, 2, 3, 6 (only if SIDA applicant), 7, and 9.
- Authorized Signatories are to complete Badge Designations and section 8.
- Bring the completed application to the Administration Office.
- All applicants must provide proof of identity and eligibility to work in the United States. See list of acceptable forms of identifications in section 5 of the application. Photocopies of identification will not be accepted.
- If the applicant is not a US citizen or is a US citizen born outside the U.S., please contact the Administration office for additional ID recommendations.

### **Training/Testing**

- Applicants must complete the applicable driving test, if needing to drive a vehicle inside the AOA (non-movement/movement)
- SIDA applicants are required to take the SIDA training course



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INFORMATION (TO BE COMPLETED BY AIRPORT)				
Invoice Number/Payment Type: _____ Receipt: _____ Date: _____	Date STA/CHRC Completed:	Picked Up Date:	Current ID Type:  Expiration:	Badge Number:  Badge Expiration:

BADGE DESIGNATIONS (TO BE COMPLETED BY AIRPORT OR AUTHORIZED SIGNATORY)		
AOA Type: <input type="checkbox"/> Limited <input type="checkbox"/> Restricted <input type="checkbox"/> Unlimited	Driving Privileges: <input type="checkbox"/> None <input type="checkbox"/> Non-Movement <input type="checkbox"/> Movement	Other: <input type="checkbox"/> SIDA <input type="checkbox"/> Fuel Handler <input type="checkbox"/> Signatory Authority

SECTION 1 – APPLICANT INFORMATION (TO BE COMPLETED BY APPLICANT)				
Legal Last Name:		Alias Last Name:		
Legal First Name:		Alias First Name:		
Legal Middle Name:		Alias Middle Name:		
Current Home Address:				
City:		State:		Zip:
Date of Birth (MM/DD/YYYY):		Country/Place of Birth (City, State, Country):		
Citizenship Country:			Race:	
Driver's License Number:			State/Expiration:	
Cell Phone:		Work Phone:		Home Phone:
E-Mail Address:				
Gender:	Height:	Weight:	Hair Color:	Eye Color:
Company/Hangar Name:			Job Title/N Number:	
<p>The information I have provided 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 on this application can be punished by fine or imprisonment or both (see Section 1001 of Title 18 of the United States Code). I also understand the Federal regulations under 49 CFR 1542.209/1544.229 impose a continuing obligation to disclose to the airport operator within 24 hours if I am convicted of any disqualifying criminal offense.</p>				
Applicant's Signature: _____ Date: _____				



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**SECTION 2 – PRIVACY ACT NOTICE (TO BE COMPLETED BY APPLICANT)**

**Authority:** 49 U.S.C. 114, 44936 authorizes the collection of this information

**Purpose:** The Department of Homeland Security (DHS) will use any biographical information to conduct a security threat assessment to evaluate your eligibility for the program to which you are applying. Your fingerprints and associated information/biometrics will be provided to the Federal Bureau of Investigation (FBI) for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories). The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI. DHS will also transmit the fingerprints for enrollment into the US-VISIT's Automated Biometrics Identification System (IDENT). If you provide your Social Security Number (SSN), DHS may provide your name and SSN to the Social Security Administration (SSA) to compare that information against SSA's records to ensure the validity of your name and SSN.

**Routine Uses:** The information may be shared with the third parties during the course of a security threat assessment, employment investigation, or adjudication of a waiver or appeal request to the extent necessary to obtain information pertinent to the assessment, investigation, or adjudication of your application or in accordance with the routine uses identified in the Transportation Security Threat Assessment System (T-STAS), DHS/TSA 002. For as long as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent or without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses.

**Disclosure:** Furnishing this information (including your SSN) is voluntary; however, if you do not provide your SSN or any other information requested, DHS may be unable to complete your application for identification media.

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**SECTION 3 – SOCIAL SECURITY NUMBER VERIFICATION FOR SECURITY THREAT ASSESSMENT PURPOSES (TO BE COMPLETED BY APPLICANT)**

I authorize the Social Security Administration to release my Social Security Number and full name to the Transportation Security Administration, Office of Transportation Threat Assessment and Credentialing (TTAC), Attention: Aviation Programs (TSA-19)/Aviation Worker Program, 601 South 12th Street, Arlington, VA 22202. I am the individual to whom the information applies and want this information released to verify that my SSN is correct. I know that if I make any representation released to verify that my SSN is correct. I know that if I make any representation that I know is false to obtain information from Social Security records, I could be punished by fine or imprisonment or both.

**Applicant's Printed Name:** \_\_\_\_\_ **Applicant's Signature:** \_\_\_\_\_

**Date of Birth (MM/DD/YYYY):** \_\_\_\_\_ **SSN:** \_\_\_\_\_

**SECTION 4 – SECURITY THREAT ASSESSMENT (TO BE COMPLETED BY AIRPORT)**

CHRC Fingerprints taken (if applicable) Date: _____	Airport received CHRC Results Date: _____	If an <i>air carrier employee</i> , did the air carrier provide a certification letter that the CHRC had been accomplished? (YES ___) (NO ___)
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Did the results of the CHRC investigation reveal any disqualifying convictions as outlined in 49 CFR Part 1542.209? (YES \_\_\_) (NO \_\_\_)

If "yes", the airport will notify the applicant that the FBI criminal record disclosed information that disqualifies him/her from gaining or retaining unescorted access authority and provide the individual a copy of the FBI/STA record if he/she requests it. The individual then shall be given an opportunity to contact the local jurisdiction responsible for the information and the FBI to complete or correct the information contained in his/her record. The airport must receive notification, in writing, of the individual's intent to correct any information he or she believes inaccurate. The airport must obtain a copy, or accept a copy from the individual, of the revised FBI record, or a certified true copy of the information from the appropriate court, prior to granting or reinstating unescorted access authority.

STA Information sent to TSA: Date: _____	Airport received STA Results Date: _____	Application Status Approved (___) Disapproved* (___) <small>*Explanation attached</small>
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If application is for SIDA: SIDA training conducted on Date: _____ By: _____	Based on the information provided in this application, the applicant meets the requirements for unescorted access privileges within the SIDA/Secured Area at the Yakima Air Terminal.  _____ Signature of Airport Security Coordinator (or alternate ASC)      Date
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**SECTION 5 – REVIEW OF ELIGIBILITY AND IDENTITY VERIFICATION (TO BE COMPLETED BY AIRPORT)**

Documents must be examined and recorded below by the airport staff. Documents must be from either List A or one document from List B and one from List C. Circle below the type of document(s). Need a copy of each. Applicants who are Non-US Citizens must bring documentation verifying identity and work authorization and the airport ID must expire no later than the expiration date of the work authorization.

**APPLICANTS NAME (PRINT):** \_\_\_\_\_

List A <i>Document that established both identity and employment authorization</i>	OR	List B <i>Document that establishes identity</i>	AND	List C <i>Document that establishes employment authorization</i>
<ul style="list-style-type: none"> <li>• U.S Passport or US Passport Card</li> <li>• Permanent Resident Card or Alien Registration Receipt Card (Form 1-551)</li> <li>• Foreign passport with a temporary 1-551 stamp or temporary I-551 printed notation on machine-readable immigrant visa</li> <li>• Employment Authorization Document that contains a photograph (Form 1-766)</li> <li>• In the case of a nonimmigrant alien authorized to work for a specific employer incident to status:               <ul style="list-style-type: none"> <li>○ A foreign passport; and</li> <li>○ Form I-94 or Form I-94A that has the following:                   <ul style="list-style-type: none"> <li>▪ bears the same name as the passport and</li> <li>▪ contains an endorsement of the aliens non-immigration status, as long as the period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form</li> </ul> </li> </ul> </li> <li>• Passport from the Federated states of Micronesia (FSM) or the Republics of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI</li> </ul>	OR	<ul style="list-style-type: none"> <li>• Driver's license or ID card issued by a State or outlying possession of the United States provided in contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>• ID card issued by federal, state or local government agencies or entities provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address               <ul style="list-style-type: none"> <li>○ School ID card with photograph</li> <li>○ Voters registration card</li> <li>○ U.S Military card or draft record</li> <li>○ Military dependents ID card</li> <li>○ U.S Coast Guard Merchant Mariner Card</li> <li>○ Native American tribal document</li> <li>○ Driver's license issues y a Canadian government authority</li> </ul> </li> </ul> <p>For persons under age 18 who are unable to present a document as listed above:</p> <ul style="list-style-type: none"> <li>• School record or report card</li> <li>• Clinic, doctor, or hospital record</li> <li>• Day-care or nursery school record</li> </ul>	AND	<ul style="list-style-type: none"> <li>• A social Security Account Number card, unless the card includes one of the following restrictions               <ul style="list-style-type: none"> <li>○ NOT VALID FOR EMPLOYMENT</li> <li>○ VALID FOR WORK ONLY WITH INS AUTHORIZATION</li> <li>○ VALID FOR WORK ONLY WITH DHS AUTHORIZATION</li> </ul> </li> <li>• Certification of Birth Abroad issued by the Department of State (Form FS-545)</li> <li>• Certification of Report of Birth issued by the Department of State (Form DS-1350)</li> <li>• Original or certified copy of birth certificate issued by a State county, municipal authority, or territory of the United States bearing an official seal</li> <li>• Native American tribal document</li> <li>• U.S Citizen ID Card (Form I-97)</li> <li>• Identification Card for Use of Resident Citizen in the United States (Form I-179)               <ul style="list-style-type: none"> <li>○ Employment authorization document issued by the Department of Homeland Secretary</li> </ul> </li> </ul>
Document Type: _____ Issuing Authority: _____ Document #: _____ Expiration: _____		Document Type: _____ Issuing Authority: _____ Document #: _____ Expiration: _____		Document Type: _____ Issuing Authority: _____ Document #: _____ Expiration: _____

**Signature of Person Verifying Information**

Signature: \_\_\_\_\_ Date (MM/DD/YYYY): \_\_\_\_\_

In addition to the above documentation, the following must be provided for Non-US Citizens, or US Citizens born abroad or naturalized Citizens

Non-US Citizens	US Citizen Born Abroad / Naturalized U.S Citizen
Alien Registration #: _____ OR I-94 Arrival/Departure Form #: _____ Non-Immigrant Visa # (if issued, must provide): _____	US Passport #: _____ OR Certificate of Naturalization #: _____ OR DS-1350 (Certification of Birth Abroad): _____



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**SECTION 6 – CRIMINAL HISTORY (TO BE COMPLETED BY SIDA APPLICANTS ONLY)**

Please indicate whether you have been convicted, or found not guilty by reason of insanity, of any of the disqualifying crimes listed below, in any jurisdiction, in the past 10 (ten) years:

- Forgery of certificates, false marking of aircraft, and other aircraft registration violations; 49 U.S.C. 46306.
- Interference with air navigation; 49 U.S.C. 46308.
- Improper transportation of a hazardous material; 49 U.S.C. 46312.
- Aircraft piracy; 49 U.S.C. 46502.
- Interference with flight crew members or flight attendants; 49 U.S.C. 46504.
- Commission of certain crimes aboard aircraft in flight; 49 U.S.C. 46506.
- Carrying a weapon or explosive aboard aircraft; 49 U.S.C. 46505.
- Conveying false information and threats; 79 U.S.C. 46507.
- Aircraft piracy outside the special aircraft jurisdiction of the United States; 49 U.S.C. 46502(b).
- Lighting violations involving transporting controlled substances; 49 U.S.C. 46315.
- Unlawful entry into an aircraft or airport area that serves air carriers or foreign air carriers contrary to established security requirements; 49 U.S.C. 46314.
- Destruction of an aircraft or aircraft facility; 18 U.S.C. 32.
- Murder.
- Assault with intent to murder.
- Espionage.
- Sedition.
- Kidnapping or hostage taking.
- Treason.
- Rape or aggravated sexual abuse.
- Unlawful possession, use, sale, distribution or manufacture of an explosive or weapon.
- Extortion.
- Armed or felony unarmed robbery.
- Distribution of, or intent to distribute, a controlled substance.
- Felony arson.
- Felony involving a threat.
- Felony involving:
  - Willful destruction of property;
  - Importation or manufacture of a controlled substance;
  - Burglary;
  - Theft;
  - Dishonesty, fraud, or misrepresentation;
  - Possession or distribution of stolen property;
  - Aggravated assault;
  - Bribery; or,
  - Illegal possession of a controlled substance punishable by a maximum term of imprisonment of more than 1 year.
- Violence at international airports; 49 U.S.C. 37.
- Conspiracy or attempt to commit any of the criminal acts listed above.

By signing below I affirm that I have **not** been convicted or found not guilty by reason of insanity of any the crimes listed above. I acknowledge that under Federal regulation 49 CFR 1542.209, I will notify the Airport with 24 hours if I am convicted of any disqualifying offense. The information I have proved 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 on this form can be punished by fine or imprisonment, or both (see Section 1001 of Title 18 of the United States Code).

Applicant Signature: \_\_\_\_\_ Date (MM/DD/YYYY): \_\_\_\_\_



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**SECTION 7 – APPLICANTS CERTIFICATION (TO BE COMPLETED BY APPLICANT, THE DAY THEY RECEIVE THE BADGE)**

*By submitting this application, I hereby acknowledge and agree to comply with the following Terms and Conditions:*

1. All ID Badges remain the sole property of Yakima Air Terminal-McAllister Field.
2. The transfer or use of ID Badges by another individual is strictly prohibited.
3. Holder of the ID Badge shall not aid or participate in allowing unauthorized access to secure or restricted areas or breach, disobey, or disregard any security directive, plan, or program at the airport.
4. Yakima Air Terminal McAllister-Field reserves the right to revoke the authorization for an ID Badge where such action is to be in the best interest of airport security. Yakima Air Terminal McAllister-Field requires the immediate surrender of any ID Badge upon notification that airport authorization has been revoked.
5. Any individual possessing an ID Badge shall promptly notify Yakima Air Terminal-McAllister Field in the event their ID Badge is lost or stolen.
6. Any individual possessing an ID Badge shall pay all airport applicable security fees. A replacement ID Badge may only be issued if the individual possessing the ID Badge declares in writing that the ID Badge has been damaged or destroyed and upon payment of the replacement fee.
7. Any individual possessing an ID Badge shall wear their badge above the waist on the outermost garment.
8. The ID Badge must be returned to Yakima Air Terminal-McAllister Field at the end of employment or change of status that resulted in the original issuance of the ID Badge.
9. Screening Notice: Any employee holding a credential granting access to a Security Identification Display Area (SIDA) may be screened at any time while gaining access to, working in, or leaving a SIDA area.

*VIOLATIONS OF AIRPORT IDENTIFICATION BADGE TERMS AND CONDITIONS MAY RESULT IN IMMEDIATE REVOCATION OF IDENTIFICATION BADGE AND ACCESS PRIVILEGES.*

I have read the previous information and received my Yakima Air Terminal ID Badge and access media, I am also aware of the Airport’s Administrative Citation for security violations.

Applicants Name (Print): \_\_\_\_\_ (Sign): \_\_\_\_\_

Date: \_\_\_\_\_ Badge Number/Keys: \_\_\_\_\_ Company/Hangar: \_\_\_\_\_

**SECTION 8 – AUTHORIZED SIGNATORY APPROVAL (TO BE COMPLETED BY THE AUTHORIZED SIGNATORY)**

SIGNATURE OF AUTHORIZED SIGNATORY MUST BE ON FILE WITH THE AIRPORT ADMINISTRATION OFFICE.

PLEASE PRINT IN BLUE/BLACK INK OR TYPE. INCOMPLETE APPLICATIONS WILL BE RETURNED

Badge Type (circle one):

New AOA Badge    
  New SIDA Badge    
  Authorized Signatory AOA    
  Authorized Signatory SIDA

As an Authorized Signatory for the below listed company, I certify that the named applicant has a need for the requested type of Identification badge. I accept responsibility for retrieving the Badge at the time of project completion or applicant’s termination. Additionally, I will **suspend** the applicants badge at termination or should he/she disclose any conviction of any disqualifying criminal offenses or if the applicant no longer meets the requirements for employment eligibility. I will return the badge promptly to the Airport Administration Office within 24 hours (or on the next business day) of suspension notification with an airport accountability form. I also understand and agree to pay all fees and fines associated with the badge subject to approximately \$15,000 fine if not reported.

Authorized Signatory (Print) \_\_\_\_\_ (Sign) \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Signatory Contact Phone No \_\_\_\_\_ Company \_\_\_\_\_

**If Applicant is a Contractor/Vendor please provide the following information:**

Contractor/Vendor Company \_\_\_\_\_ Contractor Business Address \_\_\_\_\_

Supervisor’s Full Name \_\_\_\_\_ Job Title \_\_\_\_\_ Phone Number \_\_\_\_\_



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**SECTION 9 – NO MOVEMENT AND NON-MOVEMENT PEDESTRIAN FORM (TO BE COMPLETED BY APPLICANT)**

Supplemental Information to ground vehicle operations regulations

Procedures for pedestrians in area other than movement areas or safety areas, specifically, aircraft parking ramps and infields.

1. Authorization:

- a) An operational necessity must exist for access authorization to the aircraft parking ramps and other non-movement areas of the airport. Examples of operational necessities would be: pilots and passengers of aircraft based or parked at the airport; aircraft fueling personnel; aircraft mechanics; FBO line personnel; air freight delivery personnel; air carrier personnel; approved contractors; persons visiting airport based businesses while under control of the business; FAA aviation safety inspectors, and others when specifically authorized by airport management.
- b) Any person with authorization to access the movement areas and safety areas are authorized access to non-movement areas as well.

2. Procedures:

- a) Persons authorized in section 1a MAY:

Have access privileges to aircraft parking ramps, hangar facilities, fueling areas, and airport based businesses within the airport perimeter security fence.

- b) Persons authorized access in section 1a MAY NOT:

**May not** have access to other areas of the airport where no direct justification or need exists.

**May not** use service roads or infields to walk from one location on the airport to another.

**May not** enter the Security Identification Display Area on the terminal ramp unless specifically authorized in the airport security program, and **may not** cross the terminal ramp under any circumstance.

**May not** enter any movement area or safety area (runways, taxiways and their safety areas) or cross any Movement Area Boundary Marker (solid yellow line with parallel dashed yellow line).

**May not** escort other airport badge holders.

3. Sanctions for non-compliance:

Failure to adhere to these procedures will result in: First offense, re-training; Second offense, written warning; Third offense, access authority revoked for a period of time determined by Airport Management. If violation is blatant or repeated, or creates a runway or taxiway incursion, trespass charges will be sought against the individual.

CERTIFICATION: I certify that I have read the above information and will abide by all terms and conditions of said regulations.

Applicants Name (Print): \_\_\_\_\_ Date: \_\_\_\_\_

Applicants Name (Sign): \_\_\_\_\_

Company/Hangar: \_\_\_\_\_



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**SECTION 9 – MOVEMENT PEDESTRIAN FORM (TO BE COMPLETED BY APPLICANT REQUIRING MOVEMENT DRIVING)**

Supplemental Information to pedestrian and service vehicle operations

Procedures for PEDESTRIANS on the RUNWAY or in the RUNWAY SAFETY AREA

- 1) Definition:
  - a) Movement Areas and Safety Areas are defined as Runways, Taxiways and the associated Safety Areas. Tower clearance is REQUIRED prior to crossing a solid yellow and dashed yellow line marked on the ramp(s).
  
- 2) Authorization:
  - a) The following personnel are authorized to be on foot in the movement and safety areas of the airport:
    - i) Airport Maintenance and Management personnel.
    - ii) FAA Maintenance personnel.
    - iii) ARFF personnel.
    - iv) Construction personnel working under a pre-approved Construction Safety Plan.
  - b) Pedestrians in the movement area must be in contact with the Yakima Air Traffic Control Tower.
  - c) Pedestrians must use the same radio procedures as vehicle operators.
  
- 3) Procedures for SERVICE VEHICLES operating on the RUNWAY
  - a) Fuel Truck Operations on the Runways:
    - i) Fuel Trucks are not authorized on, or to cross, runways. Fuel Trucks needing access to the opposite side of the airport must use the fuel service road on the east side of the airport. If a fuel truck has a need to cross or operate on the runway, an escort must be arranged through Yakima Airport, or YKM ARFF.
  - b) Aircraft Support Vehicles (including Towing Vehicles):
    - i) Aircraft tows are not authorized to cross, or operate on, runways. Aircraft tows that need to cross or operate on the runway must be escorted by Yakima Airport, or YKM ARFF personnel. Aircraft towing on taxiways is permitted at any time, provided clearance has been received from YKM Air Traffic Control Tower.
  
- 4) Sanctions of Non-Compliance
  - a) Failure to follow these procedures will result in: First offense, retraining; Second offense, written warning; Third offense, revocation of airfield access. Note: Depending upon the severity of the non-compliant action, any or all of the above sanctions may be enforced.

CERTIFICATION: I certify that I have read the above information and will abide by all terms and conditions of said regulations.

Applicants Name (Print): \_\_\_\_\_ Date: \_\_\_\_\_

Applicants Name (Sign): \_\_\_\_\_

Company/Hangar: \_\_\_\_\_