| PICK UP DATE INVOICE# DATE BADGE# DATE PAID CHECK# RECEIPT# BADGE# YAKIMA AIR TERMINAL BADGE APPLICATION |
|--|
| YAKIMA AIR TERMINAL BADGE APPLICATION |
| |
| |
| AOA TYPE DRIVING PRIVILEGES OTHER |
| LIMITED AOA MOVEMENT SIDA |
| |
| UNLIMITED AOA INONE SIGNATORY AUTHORITY (AIRPORT USE ONLY) |
| · · · |
| SECTION 1 - BADGE APPLICATION-TO BE COMPLETED BY APPLICANT |
| TWO FORMS OF ACCEPTABLE ID (SEE PAGE 5) ARE REQUIRED TO RECEIVE A BADGE. PLEASE PRINT OR TYPE IN BLACK OR BLUE INK. INCOMPLETE APPLICATIONS WILL BE RETURNED. |
| Name of Applicant (Print): Date: |
| Employer or Hangar Location: |
| STEP 1: Read disqualifying convictions listed below. |
| (1) Forgery of certificates, false marking of aircraft, and other aircraft registration violations; 49 U.S.C. 46306. (2) Interference with air navigation; 49 U.S.C. 46308. |
| (3) Improper transportation of a hazardous material; 49 U.S.C. 46312. (4) Aircraft piracy; 49 U.S.C. 46502. |
| (5) Interference with flight crew members or flight attendants; 49 U.S.C. 46504. |
| (6) Commission of certain crimes aboard aircraft in flight; 49 U.S.C. 46506. (7) Carrying a weapon or explosive aboard aircraft; 49 U.S.C. 46505. |
| (8) Conveying false information and threats; 79 U.S.C. 46507. (9) Aircraft piracy outside the special aircraft jurisdiction of the United States; 49 U.S.C. 46502(b). |
| (10) Lighting violations involving transporting controlled substances; 49 U.S.C. 46315. |
| (11) 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. |
| (12) Destruction of an aircraft or aircraft facility; 18 U.S.C. 32. (13) Murder. |
| (14) Assault with intent to murder. |
| (15) Espionage. (16) Sedition. |
| (17) Kidnapping or hostage taking. (18) Treason. |
| (19) Rape or aggravated sexual abuse. |
| (20) Unlawful possession, use, sale, distribution or manufacture of an explosive or weapon. (21) Extortion. |
| (22) Armed or felony unarmed robbery. (23) Distribution of, or intent to distribute, a controlled substance. |
| (24) Felony arson. |
| (25) Felony involving a threat. (26) Felony involving: |
| (i) Willful destruction of property;(ii) Importation or manufacture of a controlled substance; |
| (iii) Burglary; |
| (iv) Theft; (v) Dishonesty, fraud, or misrepresentation; |
| (vi) Possession or distribution of stolen property; |
| (vii) Aggravated assault; (viii) Bribery; or, |
| (ix) Illegal possession of a controlled substance punishable by a maximum term of imprisonment of more than 1 year. (27) Violence at international airports; 49 U.S.C. 37. |
| (28) Conspiracy or attempt to commit any of the criminal acts listed above. |

If you have been convicted of any of the listed offenses, STOP here and inform Airport personnel. You will not be eligible for access privileges.

Please Print Full Legal Name As Stated On Your Government Issued Identification

| First Name, Middle Name | | |
|---|--|--|
| List All Possible Legally Used Alias Including M If You Have Additional Alias Please Use An Ad | | tarting With The Most Recent. |
| Alias Last Name: (Most Recent) | | |
| Alias First Name | | |
| Alias Middle Name | | |
| Current Home Address: | | |
| City State Zip Code: | | |
| Date of Birth Month/ Day/Year | Country/ Place of Birth | |
| Month/ Day/Year Citizenship Country | Race | (City, state and Country) |
| Gender M F Drivers License# | | /Expiration Date |
| Company/Job Title/Position | | |
| Hangar Location/N Number | | |
| Height Weight | Hair Color | Eye Color |
| Telephone Number | E-mail Address: | |
| The information I have provided is true, complet understand that a knowing and willful false state 1001 of Title 18 of the United States Code). I als | ement on this application can be to understand the Federal regula | punished by fine or imprisonment or both |

| Applicant's | Signature | : |
|-------------|-----------|---|
|-------------|-----------|---|

Privacy Act Notice

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:__

Date:

Social Security Number Verification For Security Threat Assessment Purposes

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 Signature: | Date of Birth: |
|------------------------|----------------|
| Print Name: | SSN: |
| | |

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.
- 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.

SECTION 2 - FOR EMPLOYEES ONLY - TO BE COMPLETED BY AUTHORIZED SIGNATORY

SIGNATURE OF AUTHORIZED SIGNATORY MUST BE ON FILE WITH THE AIRPORT ADMINISTRATION OFFICE. PLEASE PRINT OR TYPE IN INK. INCOMPLETE APPLICATIONS WILL BE RETURNED

STATUS (circle one): New AOA Badge (\$31) New SIDA Badge (\$56) {Authorized Signatories (\$56) SIDA (\$31) Non SIDA}

AUTHORIZED SIGNATORY CERTIFYING FOR THE APPLICANT:

Authorized Signatory (Please Sign)

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 applicants 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 (Flease Sign) | |
|---|------------------------|
| Please Print Name of Auth Signatory | Date |
| Authorized Signatory Contact Phone No | |
| If Applicant is a Contractor/Vendor please provide the following in | nformation: |
| Contractor/Vendor Company | |
| Contractor Business Address | |
| City, State Zip Code | |
| Supervisor's Last Name | First Name |
| Supervisor's Phone Number | Supervisor's Job Title |
| | |

THIS INFORMATION TO BE COMPLETED BY THE YAKIMA AIR TERMINAL:

Date fingerprints were taken and sent to ASC:_____ Date STA information was sent to TSA:_____

Date airport received CHRC results:______ STA results:_____

Did the results of the investigation reveal any disqualifying convictions as outlined 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 individuals 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.

If the **air carrier employee**, did the air carrier provide to the airport certification that the CHRC had been accomplished? (Yes___) (No___)

THIS SECTION FOR AIRPORT USE ONLY APPLICATION (APPROVED_____) (DISAPPROVED_____)

If disapproved, explanation will be attached.

SIDA training was conducted on (date):_____

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)

TO BE COMPLETED BY APPLICANT WHEN BADGE IS RECEIVED

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

| Applicant's Signature: | Date: |
|--------------------------|--------------|
| Applicants printed name: | Company Name |
| BADGE# | Brass Keys |

 Review of Eligibility and Identity Verification
 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 Name

LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

| | LIST A Documents that Establish Both Identity and Employment Authorization | OR | LIST B Documents that Establish Identity AN | ID | LIST C Documents that Establish Employment Authorization |
|----------|---|----|--|----------|---|
| 2. 3. | U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551) Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine- readable immigrant visa Employment Authorization Document that contains a photograph (Form | | Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address 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, | 2. | |
| 5. | I-766) For a nonimmigrant alien authorized to work for a specific employer because of his or her status: a. Foreign passport; and b. Form I-94 or Form I-94A that has the following: (1) The same name as the passport; and | | gender, height, eye color, and address 3. School ID card with a photograph 4. Voter's registration card 5. U.S. Military card or draft record 6. Military dependent's ID card 7. U.S. Coast Guard Merchant Mariner Card 8. Native American tribal document | 4. | by the Department of State (Form FS-545) Certification of Report of Birth issued by the Department of State (Form DS-1350) Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal Native American tribal document |
| | (2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form. | | Driver's license issued by a Canadian government authority For persons under age 18 who are unable to present a document listed above: | 6. 7. | U.S. Citizen ID Card (Form I-197) Identification Card for Use of Resident Citizen in the United States (Form I-179) |
| 6. | Passport from the Federated States of Micronesia (FSM) or the Republic 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 | | School record or report card Clinic, doctor, or hospital record Day-care or nursery school record | 8. | Employment authorization document issued by the Department of Homeland Security |

This Section is for Airport use only.

Signature of Person Verifying Information and issuing badge:

Signature: _____

Date: _____

NON-MOVEMENT PEDESTRIAN FORM

YAKIMA AIR TERMINAL - MCALLISTER FIELD SUPPLEMENTAL INFORMATION TO GROUND VEHICLE OPERATIONS REGULATIONS. Procedures for pedestrians in <u>area other than movement areas or safety areas, specifically, aircraft parking</u> 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:

<u>May not</u> have access to other areas of the airport where no direct justification or need exists. <u>May not</u> use service roads or infields to walk from one location on the airport to another. <u>May not</u> 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.

<u>May not</u> 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). <u>May not</u> 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.

| Print Name: | Date: |
|------------------|-------|
| Signature: | |
| Employee/Tenant: | |



Yakima Air Terminal-McAllister Field

NON-MOVEMENT AREA WRITTEN EXAM

Must Score 80 or higher to pass

| Name | | Date |
|-------------|----------------|------|
| | (Please Print) | |
| Signature | | |
| | (Please Sign) | |
| Company | | |
| Reviewed by | | _ |
| | Test Score | |

| 1.) | This marking is known as: |
|-----|--|
| | a. Hold short marking |
| | b. Non-movement area boundary marking |
| | c. Taxiway edge marking |
| | |
| | |
| 2.) | |
| , | This marking is known as: |
| | a. Runway hold short marking |
| | b. Non-movement boundary marking |
| | c. Taxiway edge marking |
| | Driving on the Non-Movement area consists of the following pavement: a. Access roads |
| | b. Ramps |
| 3.) | c. Aprons |
| | d. All of the above |
| | |
| | |
| • | |
| 4.) | This sign is known as: |
| | a. Runway location sign |
| | b. Apron directional sign |
| | c. Taxiway directional sign No vehicle shall pass between an aircraft and passenger terminal when the |
| | aircraft is parked at a gate position except those vehicles servicing the aircraft. All |
| | other vehicles must drive to the rear of the aircraft and shall pass no closer: |
| 5.) | a. 20 feet |
| | b. 25 feet |
| | c. 15 feet |
| | d. 30 feet |
| | Penalties for non-compliance of the vehicular driving regulations can result in: |
| | a. Operators may have to reapply for a permit |
| 6.) | b. Temporary revocation of driver's privileges |
| | c. Permanent revocation of driver's privileges |
| | d. All of the above |
| | Piggybacking is any authorized person allowing (intentionally or unintentionally) others to pass through a secured door or perimeter passenger/vehicle gate. |
| 7.) | a. True |
| , | b. False |
| | The speed limit while driving in the non-movement area is: |
| 8.) | a. 20mph |
| | b. 15mph |
| 1 | or rempir |
| | c. 10mph |
| | c. 10mph What separates a Movement area from a Non-Movement Area? |
| 9.) | c. 10mph What separates a Movement area from a Non-Movement Area? a. Grass infields |
| 9.) | c. 10mph What separates a Movement area from a Non-Movement Area? |

| | Drivers should always give way to? |
|------|---|
| 10.) | a. Pedestrians |
| | b. Emergency vehicles |
| | c. Aircraft |
| | d. All of the above |
| | Each vehicle operator using an airport perimeter (security) gate shall ensure the |
| 11.) | gate closes behind the vehicle prior to leaving the vicinity of the gate. |
| | a. True |
| | b. False |
| | If you see construction, cones or barricades, you should: |
| 12.) | a. Practice your defensive driving and weave around the barricades and cones |
| | b. Never drive between safety cones or across delineated passenger walkways |
| | c. Drive around the construction area; if it means crossing into the movement area make |
| | sure you look both ways before proceeding |
| | If you need to enter a movement area, what should you do? |
| 13.) | a. Contact airport management or other authorized individual for an escort |
| | b. Go ahead; just proceed with caution |
| | c. Proceed with flashers on |
| | Can I enter the Security Identification Area if I'm authorized to operate on the |
| | ramps? |
| 14.) | a. Yes |
| | b. No |
| | c. Only if you have SIDA access authority |
| | While being escorted you should: |
| 15.) | a. Remain behind and at a close proximity to the vehicle providing the escort |
| 13.) | b. Drive alongside the Airport Maintenance vehicle and try not to pass them |
| | c. Pass the Airport Maintenance vehicle to the destination; you know where it is |

If you notice anyone operating in an unsafe manner please notify the airport administration office. (509) 575-6149 Thank You