



BISMARCK AIRPORT ACCESS APPLICATION INSTRUCTIONS

<u>Application Fees</u> Fingerprints \$50 Badge \$10
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SECTION I: APPLICANT INFORMATION

- 1.) Fill out your personal information as shown. Provide any past names that you have gone by.
- 2.) If you were born in the US, continue to Section II.
- 3.) If you are a US Citizen, but were not born in the US, indicate which form of Identification you will present, and include the document number.
- 4.) If you are not a US Citizen, indicate which form of Identification you will present, and include the document number. (NOTE: If you have a non-immigrant visa, you must provide the I-94 documentation.)

SECTION II: COMPANY/ EMPLOYER INFORMATION (TO BE COMPLETED BY EMPLOYER)

If you are a private individual applying for an AOA badge for hangar or plane access fill out 1, 2, 3

- 1.) Indicate the reason the employee needs airport access.
- 2.) Indicate whether the employee needs driving rights (Proof of Insurance is Required)
 - a. Movement Areas, include runway and taxiways
 - b. AOA Only, includes ramps and perimeter roads
- 3.) Indicate which badge type you are requesting.
- 4.) Fill out your employer's information, including the position title. (IF APPLICABLE)
- 5.) You as the supervisor must sign this section to verify that the employee require airport access.

SECTION III: RULES AND REGULATIONS

- 1.) Review the Rules and Regulations
- 2.) DO NOT SIGN until you come to the airport and are in the presence of an airport official.

SECTION IV: SSN VERIFICATION & PRIVACY ACT NOTICE

- 1.) Review the SSN Verification Statement and Privacy Act Notice
- 2.) DO NOT SIGN until you come to the airport and are in the presence of an airport official.

SECTION V: CRIMINAL HISTORY DECLARATION

- 1.) Only complete this section if you are requesting a WHITE or RED, badge.
- 2.) Review the declaration.
- 3.) DO NOT SIGN until you come to the airport and are in the presence of an airport official.

You will sign these sections at the airport. There are also several other items that you will need to present at the airport with your application, listed in detail in the next section.

BRING APPLICATION TO THE AIRPORT

When you come to the airport, bring the following items with you:

1. Payment – The application fees are listed at the top of the application. (Consult your employer regarding these fees)
2. Two (2) Forms of Identification (ID) – You are required to present two forms of ID. You must present the following:
 - a. Driver's License **OR** US Passport or US Passport Card
 - b. Social Security Card* **OR** Original or Certified Copy of Birth Certificate

If you are a US Citizen, and were not born in the United States, one form of ID must be one of the following:

- US Passport or US Passport Card
- Certification of Naturalization (N-550)
- US Birth Abroad Certificate (DS 1350 or FS545)
- Certificate of Citizenship

If you are a not a US Citizen, one form of ID must be one of the following:

- Non-immigrant Visa
- I-94 Arrival/Departure Form
- Alien Registration Form

Bring your application, application fees, and two forms of ID to the Airport Administration Office, located on the second floor of the Bismarck Airport Terminal Building.

After your application and fingerprints have been submitted, you will be required to complete training for your badge at the Airport Fire Station. You will receive a call from the Airport Fire Station to set up the training. **BRING THE SAME TWO FORMS OF ID TO THE AIRPORT FIRE STATION.** Upon successful completion of training, you will be issued a badge.

IF YOU HAVE ANY QUESTIONS ABOUT FILLING OUT THE BADGE APPLICATION CONTACT AIRPORT ADMINISTRATION AT 701-355-1808

*Social Security cards must be able to be used for identification purposes. Social Security cards issued prior to 1972 may state "NOT FOR IDENTIFICATION" and cannot be used for badging purposes.



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BISMARCK AIRPORT ACCESS APPLICATION

REVISED 2/12/2019

SECTION I: APPLICANT INFORMATION

NAME OF APPLICANT(LAST, FIRST, MIDDLE)				PREVIOUS NAME (LAST, FIRST, MIDDLE)			
CURRENT ADDRESS (STREET, CITY, STATE, ZIP)							
DAYTIME PHONE NUMBER			EMAIL ADDRESS				
DATE OF BIRTH MM/DD/YYYY	SEX ____ M ____ F	RACE	EYE COLOR	HAIR COLOR	HEIGHT	WEIGHT	
SOCIAL SECURITY NUMBER		PLACE OF BIRTH (STATE/COUNTRY)			CITIZENSHIP COUNTRY		

HAVE YOU PREVIOUSLY HAD AN AIRPORT BADGE YES NO IF YES, DATES BADGE WAS HELD _____

IF YOU ARE A U.S. CITIZEN NOT BORN IN THE U.S. (PROVIDE AT LEAST ONE OF THE DOCUMENTS LISTED BELOW)	IF YOU ARE NOT A U.S. CITIZEN (PROVIDE AT LEAST ONE OF THE DOCUMENTS LISTED BELOW)														
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SECTION II COMPANY/EMPLOYER INFORMATION (TO BE COMPLETED BY EMPLOYER)

REASON FOR BADGE (EMPLOYMENT, HANGAR ACCESS, FLIGHT STUDENT, BASED PILOT, ETC.)	BADGE TYPE NEEDED: <input type="checkbox"/> AOA (BLUE) <input type="checkbox"/> PARKING PERMIT <input type="checkbox"/> SIDA (RED OR WHITE)	
DRIVING PRIVILEGES 1. DO YOU NEED TO DRIVE OR OPERATE EQUIPMENT ON THE RUNWAY OR TAXIWAYS? <input type="checkbox"/> YES <input type="checkbox"/> NO 2. DO YOU NEED TO DRIVE OR OPERATE EQUIPMENT ON ONE THE RAMPS? <input type="checkbox"/> YES <input type="checkbox"/> NO		
APPLICATION POSITION TITLE:		
EMPLOYER NAME (IF APPLICABLE)	SUPERVISOR NAME (IF APPLICABLE)	EMPLOYER PHONE NUMBER (IF APPLICABLE)
EMPLOYER ADDRESS STREET, CITY, STATE, ZIP) (IF APPLICABLE)		EMPLOYER E-MAIL (IF APPLICABLE)

I CERTIFY THAT THIS APPLICANT IS ACTIVELY EMPLOYED AND REQUIRES ACCESS TO THE SIDA OR AOA AT THE BISMARCK AIRPORT AND I WILL IMMEDIATELY NOTIFY AIRPORT STAFF WHEN THE MEDIA HOLDER NO LONGER REQUIRES ACCESS.

NAME PRINTED : _____ TITLE: _____

AUTHORIZED SIGNATURE: _____ DATE: _____

SECTION III: RULES AND REGULATIONS

I agree to follow the access control rules and regulation set by the transportation security administration and/or bismarck airport and amendments thereto, as follows:

1. Immediate notification to Bismarck airport management of lost or stolen key, access card, or I.D. badge.
2. Key, access card, or I.D. badges are the property of the City of Bismarck and is non-transferable. Key, access card, or I.D. badge must be returned upon transfer or termination of employment. Bismarck Airport reserves the right to recall keys, access cards and I.D. badges failure to return may result in criminal penalty ndcc 12.1-23-05.
3. Keys, access cards, I.D. badges may not be loaned to other persons. Doing so is a violation of federal law.
4. Access must be controlled while gate/door is open. Gate/door must be closed after entering or exiting the area (stop and wait procedure).
5. Any person whose act or failure to act results in a fine or penalty being assessed against the airport or the City of Bismarck by any federal, state, or local governmental agency having jurisdiction shall be fully liable for the payment or reimbursement to the airport of such fine or penalty this liability would extend to and include the costs associated with the restitution, modification, repair, or clean-up of conditions resulting from such violations including attorney fees. These situations may include security, safety, environmental, aeronautical, health or any other airport related issues. (City of Bismarck ordinance 10-08-10)
6. Violation of access control rules may result in fines or revoking of key, access card and I.D. badge.
7. Some employees receiving keys, access card, and I.D. badge will be required to complete 49cfr part 1542.213 training for access onto the security identification area (SIDA). While in the (SIDA) the I.D. badge shall be displayed on the outer garment at all times. Challenge procedures must be adhered to.
8. Employees operating a motor vehicle on airside will be required to supply and keep current a certification of insurance that meets the minimum amounts and coverage's as determined by the Bismarck Airport.
9. false statement. it is unlawful for any person to make a false statement or false representation, orally or in writing, to a designated airport official if that false statement allows that person to access or enter the security display identification area, airport operations area, or any other secured area at the airport. (city of bismarck ordinance 10-08-09 and section 1001 of title 18 united states code)

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 can be punished by fine or imprisonment or both. (see section 1001 of title 18 of the united states code)

Applicant's Name Print _____ Signature _____ Date _____

SECTION IV: SSN VERIFICATION & PRIVACY ACT NOTICE

SOCIAL SECURITY VERIFICATION STATEMENT

I authorize the social security administration to release my social security number and full name to the transportation security administration, office of Intelligence and Analysis (OIA)), attention: aviation programs (tsa-10)/aviation worker program, 601 south 12th street, Arlington, VA 22202.

I am the individual to whom the information applies and I want this information 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 a fine, or imprisonment, or both.

PRIVACY ACT NOTICE

Authority: 6 U.S.C. § 1140, 46 U.S.C. § 70105; 49 U.S.C. §§ 106, 114, 5103a, 40103(b)(3), 40113, 44903, 44935-44936, 44939, and 46105; the Implementing Recommendations of the 9/11 Commission Act of 2007, § 1520 (121 Stat. 444, Public Law 110-52, August 3, 2007); and Executive Order 9397, as amended.

Purpose: The Department of Homeland Security (OHS) will use the biographic information to conduct a security threat assessment. Your fingerprints and associated information 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 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. OHS will also transmit your fingerprints for enrollment into US-VISIT Automated Biometrics Identification System (IDENT). If you provide your Social Security Number (SSN), OHS may provide your name and SSN to the Social Security Administration (SSA) to compare that information against SSA records to ensure the validity of the information.

Routine Uses: In addition to those disclosures generally permitted under 5 U.S.C. 522a(b) of the Privacy Act, all or a portion of the records or information contained in this system may be disclosed outside OHS as a routine use pursuant to 5 U.S.C. 522a(b)(3) including with 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 TSA system of records notice (SORN) OHS/TSA 002, Transportation Security Threat Assessment System. For as long as your fingerprints and associated information 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.

Applicant's Name Print _____ Signature _____ Date _____

SECTION V: CRIMINAL HISTORY DECLARATION (white or red badge only)

Section V must be reviewed and signed prior to submission of fingerprints.

Disqualifying criminal offenses as defined by 49 CFR 1542.209 A conviction within the last 10 years involving:

(1) Forgery of certificates, false marking or aircraft, and other aircraft registration violation; 49 U.S.C. 46306.	(17) Kidnapping or hostage taking.
(2) Interference with air navigation; 49 U.S.C. 46308.	(18) Treason.
(3) Improper transportation of a hazardous material; 49 U.S.C. 46312.	(19) Rape or aggravated sexual abuse.
(4) Aircraft piracy; 49 U.S.C. 46502.	(20) Unlawful possession, use, sale, distribution, or manufacture of an explosive or weapon.
(5) Interference with flight crewmembers or flight attendants; 49 U.S.C. 46504.	(21) Extortion.
(6) Commission of certain crimes aboard aircraft in flight; 49 U.S.C. 46506.	(22) Armed or felony unarmed robbery.
(7) Carrying a weapon or explosive aboard aircraft; 49 U.S.C. 46505.	(23) Distribution of, or intent to distribute, a controlled substance.
(8) Conveying false information and threats; 49 U.S.C. 46507.	(24) Felony arson.
(9) Aircraft piracy outside the special aircraft jurisdiction of the United States; 49 U.S.C. 46502(b).	(25) Felony involving a threat.
(10) Lighting violations involving transporting controlled substances; 49 U.S.C. 46315.	(26) Felony involving: <ul style="list-style-type: none">(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.
(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.	(27) Violence at international airports; 18 U.S.C. 37.
(12) Destruction of an aircraft or aircraft facility; 18 U.S.C. 32.	Conspiracy or attempt to commit any of the criminal acts listed in this paragraph
(13) Murder.	
(14) Assault with intent to murder.	
(15) Espionage.	
(16) Sedition.	

By signing this application, I am stating that I do not have a disqualifying criminal offense described in the paragraph above. By signing this application, I am acknowledging that I have been informed that Federal Regulations under 49 CFR 1542.209(l) impose a continuing obligation to disclose to the Airport Operator within 24 hours if I am convicted of any disqualifying criminal offense that occurs while I have unescorted access authority. The information I have provided on this application is true, complete, and correct to the best of my knowledge and belief and is provided in good faith. I understand that a knowing and willful false statement on this application can be punished by a fine or imprisonment or both (See Section 1001 of Title 18 United States Code).

Applicant's Name Print _____ Signature _____ Date _____

Note: A copy of the criminal record received by the FBI will be provided to the applicant, if requested by the applicant in writing. The point of contact for applicant questions about the CHRC, or from individuals who seek correction of their FBI criminal record, is Timothy J. Thorsen, Assistant Airport Director/Airport Security Coordinator at (701) 355-1808.