Ernest A. Love Field
Prescott Municipal Airport
City of Prescott

6546 Crystal Lane Prescott, AZ 86301
Phone: (928) 777-1114 Fax: (928) 771-5861 TDD: (928) 778-5680

AUTHORIZED SIGNATORY & SIDA CHECKLIST

- All items as outlined on Airport Security Badging Checklist, if not previously completed.
  - 3rd page of Application for Airport Credentials must indicate the appropriate access requested. If not, new application must be completed.

FINGERPRINTING REQUIRED

- Completed Fingerprint Application Form
- Completed Fingerprint Release Authorization form if prints to be provided to another individual and/or firm.
- Payment $40 ($41 after 3/1/09) for fingerprinting due at time of printing
- ELECTRONIC FINGERPRINTS WILL BE TAKEN & SUBMITTED TO FBI & TSA
- Upon receipt of results from both FBI and TSA, by City of Prescott, applicant will be notified with a single telephone call (message) and via email (if provided). Master Lessee Authorized Signatory will be notified via email. Applicant will be scheduled for next SIDA class.

NO FINGERPRINTING REQUIRED

- Letter from employer certifying results under 49 CFR Part 1542.209 and 1544.29, including case number.
- DATA WILL BE SUBMITTED TO TSA.
- Upon receipt of results from TSA, by City of Prescott, applicant will be notified with a single telephone call (message) and via email (if provided). Master Lessee Authorized Signatory will be notified via email. Applicant will be scheduled for next SIDA class.
- Following SIDA class, Authorized Signatory MUST complete "Training paper"

Authorized Signatory and SIDA Badges expire on individual's next birthday greater than 3 months from training date; subsequent certificate expires annually on birthday.

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AIRPORT SECURITY BADGING CHECKLIST

- ***Application for Airport Credentials Completed***
  - 3rd page signed by Master Lessee (i.e. RittAire, Guidance) Authorized Signatory
  - Airport Hangar, Shade, Tiedown & Storage Tenants
    - Only agreement holder will be approved for Badge unless, agreement holder submits in writing, with original authorizing signature (no fax or electronic copies), a list of other individuals who are permitted to access their space, and therefore require an Access Badge.

- ***ORIGINALS*** plus one legible copy of document(s) as listed on page 4

- ***If you are a U.S. Citizen, not born in the United States, you must provide:***
  - ORIGINAL plus one legible copy of US Passport, **OR** Certificate of Naturalization, **OR** Certification of Birth Abroad (Form DS-1350)

- ***If you are not a U.S. Citizen, you must provide:***
  - ORIGINAL plus one legible copy of Permanent Resident Card, **OR** Alien Registration Receipt Card with photograph, **OR** I-94 Arrival/Departure Form

- ***Payment*** for Badge $20 (cash or check only)

- Once all required information is provided, a photograph will be taken by Airport Administration, and DATA WILL BE SUBMITTED TO TSA.

- Upon receipt of results from TSA, applicant will be notified with a single telephone call (message) and via email (if provided). Master Lessee Authorized Signatory will also be notified via email.

- Applicant has 30 days from date of notification to pick-up Airfield Access Badge. If badge has not been picked up within those 30 days, the process must start again. When badge is picked up, and additional training form must be completed.

- Initial badges expire on individuals' first (1st) birthday after issuance. Subsequent badges expire every year on birthday.

- Badges can be renewed up to 30 days in advance, charge of $20.00

- Expired badges (even a single day), require completion of entire process including $20.00 badge charge.

- If you are employed on the PRC airport, AND, you rent space on the PRC airport, you MUST have separate badges for each purpose.

- If you have more than one employer on the PRC airport, you MUST have separate badges for each employer.

City of Prescott Airport Ernest A. Love Field	Application for Airport Credentials

Proper ORIGINAL identification, as outlined on page 4, MUST be presented at time of submission of this form to Airport Administration.

One legible photocopy of said identification must be submitted with this application

To Be Completed By Applicant

PLEASE PRINT LEGIBLY. All information on this form must be printed and legible.

Any form that cannot be read will not be processed.

Name _____
Last First Full Middle Name Nickname Alias/Maiden

List any additional names you have used: _____ _____

Date of Birth (MM/DD/YYYY): _____ Social Security Number: _____

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 that I know is false to obtain information from Social Security records, I could be punished by a fine or imprisonment or both.

Signature: _____

City & State of Birth: _____ Country of Birth: _____

Home Mailing Address: _____ City, State, Zip _____

Home Physical Address: _____ City, State, Zip _____

Phone # Home (_____) - _____ - _____ Work (_____) - _____ - _____

E-mail address: _____

Driver License: State: _____ Number: _____ Expiration Date: _____ Gender: M F

Race: _____ Eyes: _____ Height: ____Ft____In Weight: _____lbs (US) Hair: _____

List all other employers/sponsors you hold a PRC Airfield Access, Driver, Security, or SIDA badge:

_____ _____ _____

U. S. Citizen: Yes No If no, 1) What country are you a citizen of?: _____
2) Are you authorized to work by the US Government? Yes No

If you possess one of the following, please complete:

Passport Country: _____ Passport #: _

Alien Registration #: _ _ _ _ _ _ _ _ _ _ I-94 Arrival/Departure Form #: _ _ _ _ _ _ _ _ _ _ _

Non-Immigrant VISA #: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _

DS1350 Certification of Birth Abroad #: DS _ _ _ _ _ _ _ _ _ _

Airport Use Only

Credential Applied For: ( )Secured Area ( )SIDA ( )AOA ( )Driving ( )Vehicle Pass ( )Authorized Signatory

Government Employee: Y N Fingerprint CHRC: Y N Verified by: _____

Company or Sponsor: _____ Space#: _____ ADT# _____ ADT Date: _____

STA Result Date: _____ Notification of STA Result (Date/Time): _____

City of Prescott Airport Ernest A. Love Field	Application for Airport Credentials

Instructions: Please thoroughly read all of the information provided on this page. If you have any questions, make sure they are answered before you initial and sign your name and date at the bottom of this page.

If you are an employee of a Federal, State or local government (including a law enforcement officer) who, as a condition of employment, has been subjected to an employment investigation that included a fingerprint-based criminal history records check, please sign here (if you are unsure, DO NOT sign):

Signature:_____

Initial _____ 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).

Initial _____ 49 CFR Part 1540 now holds each individual responsible for their actions as they may pertain to airport security. The following is a summary those responsibilities:

- You may NOT tamper, interfere with, compromise, modify, attempt to modify, attempt to circumvent, or cause a person to tamper or interfere with, compromise, modify, or attempt to circumvent any security system, measure, or procedure implemented.
- You must Enter, or be present within the AOA, a secured area, SIDA or sterile area by complying with the systems, measures, or procedures being applied to control access to, or presence or movement in such areas.
- You must NOT use, allow to be used, or cause to be used, any airport-issued or airport approved access medium or identification medium that authorizes the access, presence, or movement of persons or vehicles in the AOA, secured areas, or SIDAs in any other manner than that for which it was issued by the appropriate authority under this part. (1540.105). (This includes sharing gate access codes.)
- You CANNOT make or cause to be made, any fraudulent or intentionally false statement in any application for any security program, access medium, or identification medium, any reproduction or alteration of any access medium, or identification medium issued under this part. (1540.103)

By my signature below, I agree that:
My security identification badge remains the property of the City of Prescott Airport (PRC), is issued for my use as long as I have an operational need for unescorted access, and is not transferable to any other individual. PRC has the right to revoke the authorization of individuals with security identification badges where such action is determined to be in the best interest of airport security.

My security identification badge must be displayed on my outermost garment above the waist at all times while inside the AOA, SIDA, or Secured Area.

If in the SIDA, Secured, or Sterile area must challenge individuals who are not displaying airport issued or airport approved identification, and immediately notify Airport Operations (928-777-1150) of any individual with an invalid ID, or who cannot produce a valid airport issued or airport approved identification. If in the AOA, I must report to Airport Operations (928-777-1150) any individual not displaying airport issued or airport approved identification.

I am accountable to the airport and the TSA under the Airport Security Program (ASP). Individuals will be held accountable for any misinformation provided (such as on the badge and/or fingerprint application) and for any violation of the federal regulations, the TSA approved Airport Security Program (ASP) or Security Directives (SDs). Any offense may be punishable by airport sanctions and/or a fine from TSA of up to $10,000.

I am prohibited from possessing a firearm in the Secured Area, unless the firearm is cased and unloaded for transport for use at a different location, or unless I am duly authorized Federal, State or Local law enforcement personnel, or member of the armed forces of the United States or the State of Arizona on official duty.

I have read and understand the individual responsibilities outlined above, and will comply with all PRC and TSA policies and regulations.

_____	_____	_____
Name (Printed)	Signature	Date

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 the biographical information to conduct a security threat assessment and will forward any fingerprint information to the Federal Bureau of Investigation to conduct a criminal history records check of individuals who are applying for, or who hold, an airport-issued identification media or who are applying to become a Trusted Agent of the airport operator. 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: This information may be shared 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 Transportation Security Threat Assessment System (T-STAS), DHS/TSA 002.

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 Name Printed	Applicant Signature	Date

To Be Completed By Employer/Sponsoring Agency Authorized Signatory

I have reviewed this application, including the vehicle registration page (if applicable) and certify that the requested credentials are necessary for the proper performance of the applicant's duties. This applicant will be given training by this company to conduct his/her job or access in a manner that will have no negative affect on the safety and security of persons or property traveling in air transportation. Upon the termination of this tenant/employee, the Airport Security Coordinator will be notified so the badge can be deactivated, and the airport issued identification badge will be immediately returned to the Airport Operations Department. This further certifies that no "person", as defined by 14 CFR Part 1.1 has made fraudulent or intentionally false statements on this application consistent with 49 CFR Part 1540.103. I understand that payment is due when the services are rendered unless prior arrangements have been made with PRC and that this company (unless otherwise noted below) will be responsible for the following fees:

- Badging Fee: $20 (Non-Refundable)
- Fingerprinting Fee: $40 (Non-Refundable; Applies to Secured Area, Sterile Area and SIDA only)
- 1st Lost Badge Fee: $50 (If lost badge is not returned within 30 days)
- 2nd Lost Badge Fee: $100 (If lost badge is not returned within 30 days)
- 3rd Lost Badge Fee: $150 (If lost badge is not returned within 30 days)

Sponsor/Company Name:_____ Phone:_____

Address:_____ City, State, Zip:_____

Applicant Job Title OR Space #:_____ Supervisor:_____

Type of access requested (circle all applicable): Secured Area SIDA Sterile Area AOA Driving
Authorized Signatory Vehicle Pass

____ **This is a tenant/based GA with _____(Company/Organization). The tenant is responsible for all applicable fees.**

_____ This individual **DOES NOT** have escort authority.

_____	_____	_____
Printed name of person authorizing applicant	Signature of person authorizing applicant	Date

City of Prescott Airport Use ONLY

This individual has received training as required by 49 CFR Part 1542.213 and as outlined in the TSA approved Airport Security Program.

Trainer Signature: _____ Training Date: _____ Initial / Recurrent

FP Case Number: _____ Disqualifying Crime?: Y N

STA Results: Approved Person Verifying FP/STA Results (Initials): _____

Badge #: _____ Date Activated: _____ Date Deactivated: _____ Payment: Cash Check Bill

Reason for deactivation: ___ Returned ___ Lost ___ Stolen ___ Destroyed ___ Other _____

Badge #: _____ Date Activated: _____ Date Deactivated: _____ Payment: Cash Check Bill

Reason for deactivation: ___ Returned ___ Lost ___ Stolen ___ Destroyed ___ Other _____

Badge #: _____ Date Activated: _____ Date Deactivated: _____ Payment: Cash Check Bill

Reason for deactivation: ___ Returned ___ Lost ___ Stolen ___ Destroyed ___ Other _____

List of Acceptable Documents

List A

Documents that Establish Both Identity and Employment Eligibility

1. U.S. Passport or U.S. Passport Card (current only)
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)
3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa
4. Employment Authorization Document that contains a photograph (Form I-766)
5. In the case of a nonimmigrant alien authorized to work for a specific employer incident to status, a foreign passport with Form I-94 or Form I-94A bearing the same name as the passport and containing an endorsement of the alien's nonimmigrant 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
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

OR

List B

Documents that Establish Identity

1. 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
2. ID card issued by Federal, State, or local government agency or entity provided it contains a photograph or information such as name, date of birth, 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
9. Driver's license issued by a Canadian government authority

For persons under the age of 18 who are unable to present a document listed above

1. School record or report card
2. Clinic, doctor, or hospital record
3. Day-care or nursery school record

AND

List C

Documents that Establish Employment Eligibility

1. Social Security Account Number card other than one that specifies on the face that the issuance of the card does not authorized employment in the United States
2. Certification of Birth Abroad Issued by the Department of State (Form FS-545)
3. Certification of Report of Birth issued by the Department of State (Form DS-1350)
4. Original or certified copy of a birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
5. Native American tribal document
6. U.S. Citizen ID Card (Form I-197)
7. Identification Card for Use of Resident Citizen in the United States (Form I-179)
8. Unexpired employment authorization document issued by Department of Homeland Security

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FINGERPRINT APPLICATION FORM

In accordance with 49 CFR 1542.209:

I have been advised that City of Prescott Airport (PRC) must collect, control and process one set of legible classifiable fingerprints under the direct supervision of PRC's Security Office.

I hereby certify 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 fine or imprisonment or both (Section 1001 of Title 10 United States Code).

I understand that if my fingerprints cannot be classifiable, I will be fingerprinted a second time.

I have been advised that if a disqualifying crime has been disclosed, I will have 30 days to notify the Airport Manager in writing of my intention to correct information that is incorrect. If notification to correct record is not made within 30 days, a final decision to deny access will be made.

I have been advised that I will be notified by the PRC ASC of a final decision to grant or deny unescorted access authority.

I have been advised that the PRC Airport Security Coordinator (ASC) is my point of contact if I have questions about the results of the criminal history records check.

I have been advised that a copy of the criminal record received from the FBI will be provided to me, if requested in writing.

I am under a continuing obligation to disclose to PRC within 24 hours if I am convicted of any disqualifying criminal offense that occurs while I have unescorted access authority.

I hereby certify that I have not been convicted, or found guilty by reason of insanity, of any of the listed disqualifying crimes in any jurisdiction during the ten years before the date of my application for unescorted access authority.

_____ _____
Applicant Full – PRINTED Name Date

_____
Applicant Signature

I certify that I have not been convicted of any disqualifying criminal offense 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 crewmembers 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, 49 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 armed robbery.
23) Distribution of, or intent to distribute, a controlled substance.
24) Felony arson.
25) Felony involving a threat.
26) Felony involving –
    a) Willful destruction of property;
    b) Importation or manufacture of a controlled substance;
    c) Burglary;
    d) Theft;
    e) Dishonesty, fraud, or misrepresentation;
    f) Possession or distribution of stolen property;
    g) Aggravated assault;
    h) Bribery; or
    i) Illegal possession of a controlled substance punishable by a maximum term of imprisonment of more than 1 year.
27) Violence at international airport, 18 U.S.C. 37.
28) Conspiracy or attempt to commit any of the criminal acts listed in this paragraph (d).
29) By signing below, I hereby certify that I have not been convicted, or found guilty by reason of insanity, of any of the listed disqualifying crimes in any jurisdiction during the ten years before the date of my application for unescorted access authority.

_____ _____

Applicant Full – PRINTED Name Date

_____

Applicant Signature

Last Revised 04/08

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FINGERPRINT RELEASE AUTHORIZATION

Please print clearly

DATE:_____

REQUESTER FULL NAME:_____

REQUESTER MAILING ADDRESS:_____

CITY, STATE, ZIP:_____

PHONE NUMBER:_____ SOCIAL SECURITY #_____

I request that the Prescott Airport Security Coordinator (ASC) provide my criminal record received from the FBI to:

NAME:_____

COMPANY NAME:_____

MAILING ADDRESS:_____

CITY, STATE, ZIP:_____

PHONE NUMBER:_____

FAX NUMBER:_____

_____ _____
Applicant Signature Date