

GENERAL AVIATION AIRPORTS Miami-Dade Aviation Department Post Office Box 025504 AMF, Miami, Florida 33159 (305) 869-1660

AIRPORT IDENTIFICATION BADGE APPLICATION

All areas must be completed upon submission and must be typed. Signatures by the employee and authorized company representatives must be in blue ink. This form will not be accepted by the Miami-Dade Aviation Department (MDAD) if it is altered (including use of correction fluid), torn, or otherwise defaced.

The application must be processed within **TWO WEEKS** from the date it is signed by the authorized company representative(s).

SECTION I. APPLICANT

Social Security Number:	First Name:	First Name:		Middle Name:		Last Name:	
Other Names Used, Including	Alias or Nick names:						
Date of Birth (MM/DD/YYYY):	Place of Birtl	h:			Title:		
Gender: Male Female	Race:	Height:		Weight:	Hair Color:		Eye Color:
Home Address:				City / State / Zip:			Telephone Number:
Driver License Number or Off	cial ID:			State Issued:		Expiration Dat	e:
US Citizen: Yes No	Passport or Naturalization Number: Alien Registra			ation Number:		Expiration Date:	
Non US Citizen: Employment Authorization No:				Visa Type:		Expiration Date:	
BADGE TYPE							
Check all that apply: Miami Executive Miami Opa-locka Executive Homestead General				New A	oplication al	Lost Badge Damaged Badge	

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SECTION II. APPLICANT'S CERTIFICATION

I hereby submit to MDAD Identification Section (ID Section) this application for an ID Badge and agree to the following:

- 1. By submitting this application for an ID Badge, I agree to comply at all times with the security rules and policies.
- 2. All ID Badges remain the property of MDAD.
- 3. My ID Badge cannot be transferred to another individual or used for any purpose by another individual.
- 4. I will visibly display my ID Badge outside my garments on my upper body whenever I am in an area of the airport.
- 5. Use of the ID Badge constitutes consent to search and monitoring at any area of the airport.
- 6. MDAD reserves the right to revoke authorization for an ID Badge where such action is determined to be in the best interest of airport security. You must immediately return the ID Badge to MDAD ID Section or your employer upon notification that your authorization has been revoked.
- 7. In the event of any change in my employee status (i.e. transfer, job title), I will obtain a new ID Badge noting the change and return the original ID Badge.
- 8. I will not aid nor participate in "piggy-backing" (allowing unauthorized access to secure or restricted areas) nor will I otherwise breach, disobey or disregard any security directive, plan or program at the airport.
- 9. I must challenge any person who enters a secured/restricted area if the person does not properly display an ID Badge. If the person I challenge cannot produce a valid ID Badge, I must immediately notify the Miami-Dade Police Department or the MDAD at GA
- 10. Contractor Identification Badges are valid only within my construction site and only for the duration of contract.
- 11. I must immediately notify my employer if my ID Badge is lost or stolen. A non-refundable fee of \$75.00 will be assessed for first replacement on lost or stolen ID Badges. Second replacement for lost or stolen \$100.00. The MDAD office at GA airports will collect the fee before a replacement ID Badge is issued.
- 12. The ID Badge must be returned to the company official at the end of my employment. The identification Badge may also be returned to the MDAD Officer at GA Airport during regular hours. A receipt will be issue to me as proof that the ID Badge was
- 13. A replacement ID Badge may only be issued if I declare in writing that the ID Badge has been lost, stolen, or destroyed.
- 14. The ID Badge must be maintained in good condition at all the times. A damage or mutilated ID Badge is not a valid ID Badge and is subject to confiscation.

I understand and agree to comply with the terms and conditions provided for in this application and agree to comply with any changes or amendments to the terms and conditions that may be imposed by MDAD. I certify that the information that 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 punishable by fine or imprisonment or both.

Applicant Name:			
	(Print)		
Applicant Signature		Date:	

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SECTION III. ACCE	SS REQUIREMENTS	(to be comp	leted by th	e employer)				
Company Name:								
Mailing Address:								
Telephone Number:			_	Fax Number:				
Authorized Representa	ative:				Title:			
Authorized Representa	ative's Signature:		Original	Signature Only Accep	table	Date:_		
			Ü					
SECTION IV. EMPL	OYER'S CERTIFICAT	ION						
the applicant's identi Employer will immed is completed, and we notify MDAD ID Section if of	mation provided by or of ify by reviewing at leas diately report to MDAD e will promptly return the tion if the applicant's ID either of the following and s unable to support sta	t two forms for ID Section if neir Identificator Badge is repapplies:	or identifica the applica tion Badge ported as b	tion (one of which nt's employmen to the MDAD ID eing lost or stole	ch bears the applic t is terminated or to Section; and (3)	cant's photogrant's photographic their contract. The Employer	raph); (2) The work at the Airport er will immediately	
	cant inconsistencies in				tion.			
I have read and under to report as required	erstand the potential pol.	enalties desc	ribed in this	s application for	providing false or	misleading in	oformation or failing	
Certification Official's I	Name:				Title:			
		P	rint			Prir	nt	
Certification Official's	Signature:	Original S	Signature Only	Acceptable				
		onga. c	nga.a.o oy	, toooptable				
If applicant's employer General Contractor / Consu	r is a construction contra	ctor of MDAD,		oort tenant, please	e complete the follo Project Numb			
Project Commencement Date:		Gubcontractor	Project Completion Date:			Project Location:		
		Project Compl						
r reject Commonicement Date.		i roject compi	Troject Completion Bate.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Badge Number:	Date Issued:	FOR MDAD A	Expiration Da	NTROL OFFICE te:	USE ONLY Given by:			
3								
			l PAY	MENT				
Cash:	Check:	No Charge:		Replacement:	Damage:	l	Lost:	
Revenue Receipt Number				ı	1			

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SECTION V. GENERAL AVIATION AIRPORTS RAMP USE REGULATIONS

The party signing below has requested an ID Badge from the Miami-Dade Aviation Department (MDAD) that will allow the ID holder to drive on the General Aviation Airports ramp areas. The following statements must be initialed and signed by the authorized ID holder.

Driving on the airport ramp areas is a privilege and requires a clear understanding of liability and airport operations and safety concerns. Acknowledging the following points listed below is required to minimize unauthorized access to the airport, potential damage to aircraft, and security concerns, as well as to help prevent vehicle - pedestrian runway and taxiway incursions.

Initial each entry and sign below:							
Vehicle access to the ramp areas is a privilege extermination designated General Aviation Airport who has requestable Badge is controlled by MDAD and is issued to individual to the second sec	sted MDAD to issue the	ID Badge to the ID Badge holder. The ID					
Authorization to operate a motorized vehicle on the operational reasons ass determined by MDAD, bas							
ID cards will be encoded by the GA Airport Operato leasehold areas. Note: Vehicle operations are rest attached sheet. Convenience commuting across at allow other vehicles access is NOT authorized. On	tricted to specifically app djacent leaseholds is no	proved leasehold areas as marked on the tauthorized. Tailgating or piggybacking to					
The ID Badge driver will not exceed 15 mph on ope proximity to aircraft, during inclement weather, and							
Pedestrians, aircraft and helicopters under power, a	Pedestrians, aircraft and helicopters under power, and aircraft under tow have the right of way.						
Vehicles or pedestrians are not allowed to cross the direct coordination and escort from Airport Operation		arking or enter taxiways or runways without					
An ID Badge holder who has had vehicle access re ramp area until the holder has completed a driver tr General Aviation Airport's Division Director, and has to regain authorization to access the Airport ramp a	aining session at MDAD s been provided written	/ MIA, received the approval of MDAD's					
ID Holder Signature: Original Signature Only	ID #:	Date:					
Tenant Authorized Signature:		Date:					
Original Sign	nature Only						
Airport Manager Signature:		Date:					

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