

ID Badge Application Instructions

Page 1

Applicant's Information Section:

Applicant fills in the top section in its entirety. NO NICKNAMES ARE ALLOWED! Full legal name only including full middle name. The applicant must sign and date this section.

Employer/Sponsor Information & Access Request

The employer (or sponsor in the case of general aviation pilots) must fill in this section.

Employer's name and mailing address, phone number, fax number (if applicable), applicant's job title, and his/her date of hire must be filled in.

Explain briefly why the ID Media is being requested such as aircraft stored in T-Hangars, airline employee, general aviation tenant, etc. In the case of contractors, please include what project you are working on.

Answer the next 2 questions by circling Yes or No. The Airport Security Coordinator (ASC) will determine the final access that will be granted to the applicant.

The employer/sponsor's primary contact must sign and date this section.

Page 2

Privacy Act Notice / Rules & Regulations

Applicant must read each section carefully then sign & date each section.

Page 3

Enumeration of Crimes

Applicant must complete this form and sign.

Page 4

Airline & Government Employees Verification

Only commercial airline employees and government employees, who are subject to a CHRC (fingerprints) as a condition of employment, must complete this form and submit it with the rest of the ID Badge Application.

Accompanying I-9 Form

List of acceptable identification documents

The applicant must provide the originals of specific identification documents to the Airport Security Coordinator along with the application and payment. If the applicant has one of the documents in List A, that is all he/she needs to provide to prove identification. If the applicant doesn't have one of the documents in List A, he/she must then produce one document out of List B AND one from List C.

If the applicant is to have driving privileges within the perimeter fence, he/she must produce an unexpired driver's license per FAA regulations.

Any questions, please contact Cindy at 712-279-6167 or 712-898-4693!

Sioux Gateway Airport / Col. Bud Day Field ID Media Application/Gate Card Agreement

This application must be filled out in its entirety. *Required information. Optional information is up to the applicant's discretion. Any missing information will cause a delay in issuing an ID Media. All personal information is placed in a locked, secure area.

Applicant's Information

*Full Legal Name _____
(Last) (First - No Nicknames) (Middle Name)

*Also Known As: _____
(Last - Maiden Name) (First - Nicknames) (Middle Name)

*Home Address _____

*City _____ *State _____ *ZIP _____ *Phone (Hm) _____

*Mailing Address (if different from above) _____

*City _____ *State _____ *ZIP _____ Mobile Phone _____

*Email Address: _____

*Date of Birth _____ *Soc. Sec. No. _____

*Birthplace _____ *Citizenship _____
(city) (state) (country)

*Country of Birth _____

*Height _____ ' _____ " *Weight _____ lbs *Hair _____ *Eyes _____

Read Completely Before Signing

By signing this application, I hereby give the Sioux Gateway Airport/Col. Bud Day Field (SUX) or my employer permission to conduct a background check to the extent required by 49CFR1542 and current airport regulations. The ID media will remain the property of SUX and must be returned immediately upon demand. The ID media must be used in accordance with the regulations which accompany this form as well as those which may be established by the Airport or the Transportation Security Administration (TSA). I agree that the loss of the ID media will subject me to a fine. 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). I authorize the Social Security Administration to release my Social Security Number and full name to the TSA, Office of Intelligence and Analysis (OIA), Attention: Aviation Programs (TSA-10)/Aviation Worker Program, 601 South 12th Street, Arlington, VA 20598. I am the individual to whom the information applies and want this information released to verify that my social security number 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.

_____ *Applicant's Signature _____ *Date

Employer/Sponsor Information & Access Request

*Employer/Sponsor _____ *Phone _____

*Employer Address _____ FAX _____

_____ *Applicant's Job Title _____

_____ *Employment Date _____

1. Why is an ID Media being requested? *

2. Will the applicant operate a motor vehicle (i.e. car, pickup, tug, lawn mower, tractor, fork lift, etc.) within the perimeter fence? (If yes, a copy of an unexpired, state-issued driver's license must accompany this application.) * Yes No

3. Will the applicant need escort privileges within the Security Identification Display Area/Sterile Area of the Terminal Building? (Circling "yes" is not a guarantee that this privilege will be granted.) * Yes No

Employer Certification

The above named individual is to be issued an airport access ID madge for the reason indicated. I hereby agree to pay the lost/stolen badge fees if the ID media is not returned within one (1) day of cancellation of security access.

_____ *Company/Individual _____ *Signature _____ *Date

Sensitive Security Information

WARNING: This document contains sensitive security information that is controlled under 49 C.F.R. Parts 1520 and 1542. No part of this document may be disclosed to persons without a "Need to know," as defined in 49 C.F.R. Parts 1520 and 1542, except with the written permission of the Administrator of the Transportation Security Administration or the Secretary of Transportation. Unauthorized release may result in civil penalties or other action. For U.S. Government agencies, public disclosure governed by 5 U.S.C. 552 and 49 C.F.R. Parts 1520 and 1542.

Sioux Gateway Airport / Col. Bud Day Field

Read Completely Before Signing

* Privacy Act Notice

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

Purpose: The Department of Homeland Security (DHS) and the Sioux Gateway Airport/Col. Bud Day Field (SUX) will use the biographic information to conduct a security threat assessment (STA). 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 Nex 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. DHS will also transmit your fingerprints for enrollment into US-VISIT 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 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 DHS as a routine use pursuant to 5 U.S.C. 522a(b)(3) including with the third parties during the course of a STA, 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) DHS/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.

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

I have read and understand the above Privacy Act Notice.

Applicant's Signature _____

Date: _____

* Rules & Regulations

- 1 The Badge Holder understands and agrees that the ID Media is the sole property of the Sioux Gateway Airport/Col. Bud Day Field and will return the media upon termination of employment, expiration of the media, and/or upon demand.
- 2 The Badge Holder agrees to make sure the media is returned to the Airport Security Coordinator (ASC).
- 3 The Badge Holder understands and agrees that under no circumstances will the airport-issued ID Media exempt the badge holder from TSA screening policies and procedures prior to boarding a commercial flight.
- 4 The Badge Holder agrees to immediately report lost and stolen media to the ASC.
- 5 The Badge Holder agrees to pay the lost badge fees, set forth by the Airport Board of Trustees, before a replacement badge is issued. These fees will be waived if the Badge Holder can produce a police report stating the ID Media has been stolen.
- 6 If the Badge Holder is a contractor or an employee of a Contractor doing business at the Airport, the Badge Holder agrees and understands that the Contractor's Security Deposit will be forfeited if the ID Media is lost or stolen.
- 7 The Badge Holder understands that, if the lost or stolen ID Media is found, it will be returned as soon as possible to the ASC and the badge holder may be eligible for a refund of the penalty less the cost of the duplicate badge, if the total re-badge process has not started.
- 8 The Badge Holder understands and agrees to comply with the Annual ID Media Audit. He/She also understands and agrees that failure to respond to the audit will result in termination of access and badge will be considered lost. The Badge Holder will be responsible for the payment of the lost badge penalty.
- 9 The Badge Holder understands and agrees that the ID media is color coded for specific areas and further understands and agrees to remain only in the areas he/she is authorized to.
- 10 The Badge Holder understands and agrees that he/she will not enter the Security Identification Display Area (SIDA) unless authorized.
- 11 The Badge Holder understands and agrees to come to a complete stop immediately after accessing an automatic gate and remain stopped preventing any unauthorized entry until the gate has completely shut.
- 12 The Badge Holder understands and agrees to visibly display his/her ID Media at all times while in the Air Operations Area (AOA) above the waist and on the outer-most clothing.
- 13 The Badge Holder understands and agrees not to allow individuals or vehicles to "piggy-back" into the secured areas of the airport unless he/she is the airport-approved escort for that individual(s) or vehicle(s).
- 14 The Badge Holder understands and agrees that the ID Media is non-transferable and will not allow any individual, other than himself/herself, to use the media to access the AOA or any other secured portion of the airport.
- 15 The Badge Holder understands and agrees that, once badged, he/she is no longer allowed to be escorted in the AOA.
- 16 The Badge Holder understands and agrees, when escorting individuals who do not have an airport-issued ID Media, to remain with the individuals and maintain control of them at all times while in the AOA or any other secured portion of the airport.
- 17 The Badge Holder agrees and understands that it is his/her responsibility to contact the ASC prior to expiration of his/her ID Media to make arrangements for its renewal.
- 18 The Badge Holder agrees and understands to pay all fees associated with my airport-issued ID media as set forth by the Sioux Gateway Airport's Board of Trustees. The Badge Holder further understands that the fees may change without notice.
- 19 The Badge Holder understands and agrees that any violation of current or future TSA, FAA, or Sioux Gateway Airport policies, rules, and/or regulations may result in loss of access, warnings, and/or fines.
- 20 The Badge Holder understands and agrees he/she is personally responsible for paying all fines assessed due to his/her violation of any security regulation or rule.

signature

date

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Sioux Gateway Airport / Col. Bud Day Field

* Enumeration of Crimes

To apply for an Airport ID badge, this form must be completed. Any person knowingly providing false certification to the completion of the required 5 or 10 year employment history check or false certifications regarding prior conviction of any of the disqualifying crimes in the last 5 or 10 years, may be subject to prosecution under applicable Federal, State, or Local Laws.

(Please type or print in ink)

Name: _____ Date of Birth _____
Last First (no nicknames) Middle Name MM/DD/YY

Any Aliases, Nicknames, or Maiden Name: _____

Disqualifying criminal offenses. An individual has a disqualifying criminal offense if the individual has been convicted, or found not guilty of by reason of insanity, any of the disqualifying crimes listed in this paragraph in any jurisdiction during the 10 years before the date of the individual's application for unescorted access authority, or while the individual has unescorted access authority. The disqualifying criminal offenses are as follows:

- 1 Forgery of certificates, false marking of aircraft, and other aircraft registration violation, 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 an 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. 46052(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 airports; 18 U.S.C. 37.
- 28 Conspiracy or attempt to commit any of the aforementioned criminal acts.

I certify that the above information is true and accurate. I further certify that I have reviewed the above-listed crimes, for which conviction of any one or more in the last 10 years would disqualify me for unescorted access to the secured area of an airport. I have not been convicted of any crimes listed. If convicted of any of these crimes in the future, I will immediately return my airport identification badge.

Applicant's Signature

Date

Social Security Number

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Sioux Gateway Airport / Col. Bud Day Field

***Commercial airline employees** and ***government employees**, who are subject to a Criminal History Records Check and Employment Background Check as a condition of employment, must complete and submit this form along with the ID Badge Application.

Verification of Fingerprint Results

The following fingerprint results were returned from the FBI with no history of convictions for any of the disqualifying crimes contained in 49 CFR Part 1544.229. The fingerprinting of the individual below is in accordance with the Airport Security Improvement Act of 2000.

Applicant's Name: _____

Date Fingerprints Submitted: _____

FBI Case Number: _____

Fingerprint Results: _____

Employment History Check

The 10-year Employment History Check was performed on the above named individual on:

_____ and there are no gaps in employment of 12 months or more.

Verification of Security Threat Assessment

A Security Threat Assessment was performed on the above named individual on:

_____ The applicant was approved and a copy of the results are attached.

Employer's Statement

I, _____, hereby certify that the information provided above
(please print)

is true and correct to the best of my knowledge. I understand that providing false information subjects me to prosecution under Federal, State, and/or Local codes.

(signature)

(date)

Employer/Agency: _____

Address: _____

Phone Number: _____

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**Sioux Gateway Airport
Col. Bud Day Field
Security Charges & Fees**

Description	Amount
1 Year Employee Parking	\$ 35
1 Year Non-Employee Parking (<i>minimum 12 months</i>) **	\$ 360
ID Media - No Fingerprints	\$ 65
ID Media - with Fingerprints	\$ 150
ID Renewal/Replacement Fee	\$ 30
Lost Badge Fee 1st Offense	\$ 150
Lost Badge Fee 2nd Offense	\$ 300
Reactivation Fee	\$ 50
Lost Key Charge (<i>per key</i>)	\$ 50

Effective 11/1/11 per the Board of Trustees

**** "Airline Crew" ID must be presented prior to issue of parking permit. For commuting commercial airline crewmembers only!**

Payment Information

All badge fees must be paid before badges can be issued.

Payment can be made by check, cash (exact amount), or credit card.

Credit Card Authorization Information

Payment Amount: _____

Type of Card (circle one): MAST VISA DISC AMEX

16 Digit Card #: _____

Security Code CVC: _____

Expiration Date: _____

Exact Name on Card: _____

Billing Address of Card: _____

By signing this statement, the credit card holder authorizes the Sioux Gateway Airport/City of Sioux City to process payment using the above card information.

_____ (signature) _____ (date)

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	AND	LIST C Documents that Establish Employment Authorization
1. U.S. Passport or U.S. Passport Card		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		1. A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		2. 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		2. Certification of Birth Abroad issued by the Department of State (Form FS-545)
3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa		3. School ID card with a photograph		3. Certification of Report of Birth issued by the Department of State (Form DS-1350)
4. Employment Authorization Document that contains a photograph (Form I-766)		4. Voter's registration card		4. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
5. 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 (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.		5. U.S. Military card or draft record		5. Native American tribal document
		6. Military dependent's ID card		6. U.S. Citizen ID Card (Form I-197)
		7. U.S. Coast Guard Merchant Mariner Card		7. Identification Card for Use of Resident Citizen in the United States (Form I-179)
		8. Native American tribal document		8. Employment authorization document issued by the Department of Homeland Security
		9. Driver's license issued by a Canadian government authority		
		For persons under age 18 who are unable to present a document listed above:		
		10. School record or report card		
		11. Clinic, doctor, or hospital record		
		12. Day-care or nursery school record		
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				

Illustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274).

Refer to Section 2 of the instructions, titled "Employer or Authorized Representative Review and Verification," for more information about acceptable receipts.