



APPLICATION FOR SIDA BADGE

SANTA MARIA PUBLIC AIRPORT DISTRICT

3217 Terminal Dr
Santa Maria, CA 93455
(805) 922-1726 / Fax (805) 922-0677

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SMX BADGE # EXPIRATION DATE: STA DATE: BADGE RETURN DATE

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Renewal

DO NOT WRITE ABOVE LINE

LAST NAME: (Print Clearly)		FIRST:		M.I.	ALIAS		EMPLOYEE I.D. #		BILL	<input type="checkbox"/> Employer	
									<input type="checkbox"/> Employee		
EMPLOYER:		JOB TITLE:		SUPERVISOR'S NAME:			WORK PHONE: ()		HOME PHONE: ()		
HOME ADDRESS:				CITY:			STATE:		ZIP CODE:		
WORK ADDRESS:				CITY:			STATE:		ZIP CODE:		
SEX:	HEIGHT:	WEIGHT:	HAIR COLOR:	EYE COLOR:	DATE OF BIRTH:	SOCIAL SECURITY #	DRIVERS LICENSE #	ST			
CITY AND STATE OF BIRTH:			CITIZENSHIP:		ALIEN REGISTRATION #:		NONIMMIGRANT VISA #:				
PASSPORT NUMBER:			PASSPORT COUNTRY:								

Authorized Signatory: I accept responsibility for retrieving the ID badge at the employee's time of termination. Additionally, I will SUSPEND the employees' badge at termination or should they disclose any conviction of any disqualifying criminal offense or if there is a finding of not guilty by reason of insanity. I will notify Airport Operations PROMPTLY.

PRINT NAME _____

SIGNATURE _____

DATE _____

(ADDITIONAL INFORMATION ON BACK OF PAGE)

CONDITIONS FOR BADGE HOLDERS

-READ CAREFULLY BEFORE SIGNING -

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. See section 1001 of Title 18 of the United States Code. I also understand if my employer is unavailable, I will return the ID immediately to the Airport Administration Office or Airport Police. I acknowledge that I have received instructions for the use of the security access badge. I also understand that it is my responsibility to notify the Airport immediately if the badge is lost, stolen, or destroyed.

It is agreed that the badge you will be issued gain access to the Air Carrier Restricted Areas is the property of and shall be immediately returned to the Santa Maria Airport District upon termination of employment. It is further agreed that the District will be notified immediately if the badge is lost, stolen or misplaced. Replacement/ reactivated badges will be issued for a lost/stolen fee of \$100.00.

SIGNATURE OF APPLICANT: _____

DATE: _____

FOR AIRPORT USE ONLY	Initial	ID #	DATE ISSUED	EXPIRATION DATE
	Collection			
	Transmit			
	Authorization			
	Issued			

PLEASE READ THE FOLLOWING DISQUALIFYING CRIMINAL OFFENSES AND INDICATE BY EACH OFFENSE IF YOU HAVE OR HAVE NOT BEEN CONVICTED OR FOUND NOT GUILTY BY REASON OF INSANITY (YES OR NO)

§1542.209(d) 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 (d) 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—

	YES	NO
(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 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 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; 18 U.S.C. 37.		
(28) Conspiracy or attempt to commit any of the criminal acts listed in this paragraph.		

I understand and acknowledge that once granted unescorted access privileges, Federal regulations require me to disclose to the Airport Operator (SMX) within 24 hours, an arrest for or conviction of any of the crimes described in 49 CFR 1542.209. Additionally, in the event of a conviction for a crime listed in 49 CFR 1542.209, I shall surrender to SMX the SIDA access medium issued to me within 24 hours of such conviction.

SIGNATURE OF APPLICANT:

DATE:

SIDA CARD INFORMATION SHEET ALL AIRPORT ID CARD APPLICANTS

- Each tenant will be issued one ID card per person. Additional cards for friends/ family may be issued by special request. NEVER loan your card to anyone. This card is issued solely for your use. The fee for each ID card is payable before a card is issued. You must keep the ID card on your person at all times when at the airport. The ID card must be presented upon request.
- **Applications must be submitted a minimum of five (5) business days prior to the card being issued.**
- All airport issued cards are the property of Santa Maria Public Airport. Therefore, **they must be returned to the Airport Badging Office at the conclusion of your duties on the airport**, or if requested by the Airport or Police.
- By having an Airport Access ID Card, you are entrusted with certain Sensitive Security Information (SSI) such as airport procedures and access codes. This information will not be released without proper authorization.
- **There is a fee if your card is reactivated, lost, stolen, not returned, or if it becomes inoperative due to misuse or abuse.** DO NOT destroy/ modify/ or deface the card. If any ID card is deactivated due to misuse or violation, you will be charged the reactivation fee. All fees are subject to change without notices.
- Obey ALL Posted signs. The Airport Speed Limit is **15 MPH. Always give right of way to aircraft and emergency vehicles.**
- Allow only authorized vehicles into the AOA. An authorized vehicle is someone entering the AOA with a valid access card or Airport issued ID with access privileges. **Pedestrians are not allowed to WALK through vehicle gates.**
- Ensure the gate or door that you pass through closes securely behind you. KEEP ALL DOORS/GATES CLOSED AND SECURE.
- Ensure that no one follows you through a door or a gate (piggybacking) unless that person is under your escort. Piggybacking can carry fines up to \$25,000 and loss of airport access.
- You may challenge a person to ensure they have a badge by asking to see it. If a badge cannot be provided, or to report any suspicious activity, please contact the Airport (805 922-1726) or Santa Maria Police (911) immediately.
- You have escort privileges. These privileges come with responsibilities. Anyone you are escorting is your responsibility. Do not escort more persons than you can control. Ensure those you are escorting understand that they must remain with you **at all times**.
- The Sponsor requesting issuance of the Airport ID card is responsible for monitoring the use of that card. **The Sponsor is responsible for retrieving the ID cards from terminated personnel and all sponsored personnel, if no longer a tenant or employed at a business on the Airport. Then, immediately return the ID cards to the Airport Badging Office. Once the Sponsor is aware a card is no longer needed, they must immediately contact the Airport Badging Office to deactivate/stop list it.**
- You and your Sponsor are responsible for your card. **Report lost or stolen cards to the badging office immediately.**
- Any commercial operator, its officers, agents, employees or clients, and any other individual airport user convicted of violating any security regulation, shall be punished by a fine not to exceed twenty-five thousand dollars (\$25,000) as set forth by the Airport Manager or the Transportation Security Administration.
- In addition, any commercial operator, its officers, agents, employees or clients, and any other individual airport user who violates, fails to conform with, or disregards any rule, requirement, obligation or regulation of the airport may lose the privilege to use the airport, at the discretion of the Airport Manager, for a specific period of time up to and including permanent loss of airport access.
- Violations of any of the above rules can result in the revocation of your ID card, fines, and loss of access to the airport.

By signing below, I accept the roles and responsibilities of being issued an airport ID card and will abide by the policies.

ALL BADGES MUST BE PICKED UP WITHIN 30 DAYS OF NOTIFICATION
Please ask if you have any questions.

Print Applicant Name: _____ Hangar #/Company: _____

Signature: _____ Date: _____

DRIVING ON THE NON-MOVEMENT AREA - I HEREBY CERTIFY THE FOLLOWING:

- I have read and understand the Airport Vehicle Rules and Regulations. I will abide by all traffic, parking and security regulations.
- I will maintain current and valid vehicle registration and insurance on Airport property.
- I agree the vehicle will not be parked on Airport property more than 24 hours without prior written authorization.
- I authorize the Santa Maria Public Airport District to move my vehicle in the event of an emergency or prevent damage to said vehicle.
- I further understand that the Airport has no liability for loss, theft, or damage to my vehicle while it is on Airport property.

Signature: _____ Date: _____

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, authorizes the collection of this information.

Purpose: The Department of Homeland Security (DHS) 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. DHS will also transmit your fingerprints for enrollment in 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 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) 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 the 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 a security threat assessment.

Individuals who have successfully completed a CHRC to obtain an airport-issued ID that individuals who violate aviation security requirements resulting in ID media revocation, will be added to the centralized database (CRD) for a period of five years. For those who wish to pursue expungement contact Aviation.workers@tsa.dhs.gov

I authorize the Social Security Administration to release my Social Security Number and full name to the Transportation Security Administration, Enrollments Services and Vetting Programs, Attention: Vetting Programs (TSA-10)/Aviation Worker Program, 6595 Springfield Center Drive, Springfield, VA 20598-6010

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: _____

Date of Birth: _____

SSN and Full Name: _____



A. Airport Badge Agreement

1. I will not allow anyone else to use my Airport SIDA I.D. badge.
2. I will wear my SIDA I.D. on the outermost garment at all times.
3. I have received and understand the Santa Maria Airport SIDA training.
4. I will challenge & report on any individual who is not displaying an Airport I.D. within a restricted area & report the incident to Airport Operations or a LEO (Law Enforcement Officer), immediately.
5. I will ensure proper closing & locking of all Air Operations Area doors or gates I use.
6. I will not allow anyone; I am not escorting, to follow me, or my vehicle through any door or gate.
7. I will report the theft or loss of my I.D. or key immediately to Airport Operations.
8. I report immediately any security violations I witness to Airport Operations or the Airport LEO.
9. It is agreed that the badge I will be issued to gain access to the SIDA is the property of the Santa Maria Public Airport and it will be returned upon request, termination of employment, or if unescorted access to the SIDA is no longer required.
10. I understand this badge is not to be photographed or placed on social media.
11. I have read the above security procedures, and I understand that failure to comply with any of them will result in revocation of my I.D., which means I will not be allowed access to security-controlled areas of the Airport.

SCREENING NOTICE: Any employee holding a credential granting access to a Security Identification Display Area may be screened at any time while gaining access to, working in, or leaving a Security Identification Display Area.

_____ Signature _____
 Print Badge Holder Name Badge Holder

SIDA TRAINING
On this date, the above cardholder has successfully completed SIDA Training in accordance with Transportation Security Regulations § 1 5 4 2 . 2 1 3 , § 1 5 4 2 . 2 1 7 (C) (2) , § 1 5 4 2 . 1 0 3 (A) (1 1) , at the Santa Maria Public Airport, Santa Maria, California.

_____ SIGNATURE: (TRAINER) _____ DATE: _____