NORTHERN COLORADO REGIONAL AIRPORT





Please complete the following information and return to the

Airport Office with Acceptable Docum (PRINT CLEAR	"B".	Badge #		HID#			
Last Name]	First Name					
Full Middle Name	2	Social Security Number					
Gender	1	Date Of Birth (MM/DD/YYYY)					
Place Of Birth (NCIC)			Citizenship (NCIC)				
Alien Registration Number	1	Non-Immigrant Visa Number					
Passport (NCIC & Number)]	Passpor	t Issuing Co	untry			
Alias	1	Alias					
Residence Address	1	Alias					
Residence City, State, Zip	(Contact Phone					
Hangar Number]	Employer					
Condo Association		Aircraft Registration Number					
E-Mail Address							
Acceptable Identification Documents (I	nternational Applicants	see Atta	achment B)				
Option 1 US Passport or Passport Card	Option 2 □ Drivers License, □ AND Social Sec						
ON A	<u>Authorized Rep</u> IRPORT EMPLOYEI			<u>IOOL</u>			
I hereby certify that the applicant is empunescorted access to the AOA. I agree to administration immediately, and return	collect their badge upo	on term					
Printed Name:							
Company:							

Signature: ______ Date: _____

AOA Badge Applicant

Upon signing below, I swear and/or affirm that I have read and understand the information above. 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 acknowledge 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 United States Code.) I acknowledge my responsibility to follow the security measures, protocols, and procedures at FNL as required under 49 CFR 1540.105(a).

Printed Name	
Date	
Security Administration, Office of Tran	stration to release my Social Security Number and full name to the Transportation asportation Threat Assessment and Credentialing (TTAC), Attention: Aviation Program, 601 South 12 th Street, Arlington, VA 20598.
	nation applies and want this information to verify that my SSN is correct. I know know is false to obtain information from Social Security records, I could be both.
Signature:	Date of Birth:
	Date of Birth:
SSN and Full Name: Signatory Certification By signing below, I attest that I have redeclared need for unescorted access to	AIRPORT ADMINISTRATION Eviewed this application, compared to the supporting identification documents, and the AOA. I attest the individual applicant acknowledged their security
SSN and Full Name: Signatory Certification By signing below, I attest that I have redeclared need for unescorted access to responsibilities under 49 CFR 1540.10. Assessment (STA) for this applicant	AIRPORT ADMINISTRATION Eviewed this application, compared to the supporting identification documents, and the AOA. I attest the individual applicant acknowledged their security
SSN and Full Name: Signatory Certification By signing below, I attest that I have redeclared need for unescorted access to responsibilities under 49 CFR 1540.103. Assessment (STA) for this applicant	AIRPORT ADMINISTRATION Eviewed this application, compared to the supporting identification documents, and the AOA. I attest the individual applicant acknowledged their security 5(a). I approve Northern Colorado Regional Airport to complete a Security Threat

NORTHERN COLORADO REGIONAL AIRPORT AIRPORT SECURITY PROCEDURES

The Undersigned, by accepting a Security ID Badge issued by the Northern Colorado Regional Airport, hereby acknowledges and agrees to the following:

- The Northern Colorado Regional Airport has an approved Airport Security Program established and approved by the Transportation Security Administration.
- The Airport issues security identification media for the purpose of allowing authorized individuals with unescorted access into the Secured, Sterile, Airport Operation Area and Display areas.
- The Airport Administration has the authority to cancel the airport-issued unescorted media
 at any time that an individual is found to be in violation of any Airport or TSA regulation
 or procedure at the discretion of the Airport Security Coordinator.
- The badge holder will not loan their badge or borrow another.
- The badge holder will always scan their badge as they enter an AOA gate and, after passing through the gate, stop and wait for the gate to fully close to monitor that no persons or vehicles follow them through.
- The badge holder will notify Law Enforcement (911) when they observe any suspicious or illegal activity including a person or vehicle entering the AOA without using proximity card readers at electronic lift gates.

SIGNED:	DATE:
PRINTED NAME:	
EMPLOYER:	

BADGE TYPE: SIDA STERILE AOA

choose one

Attachment A The Privacy Act of 1974 5 U.S.C. 552a(e)(3)

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 (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 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 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) DHSITSA 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 may be unable to complete your application for a security threat assessment.

Signature		
Print Name		
Date		



Non-Movement Area Training Test

	NAN	1E: DATE:					
1.	AOA Badges are required to enter						
	a. b. c. d.	The Fort Collins-Loveland jetCenter's pilot flight planning room. The Non-Movement Area of the Airport without an escort. The ILS critical area. The FBO parking lot.					
2.	AOA	AOA Badge holders are NOT authorized to					
	a. b. c. d.	Operate ground vehicles in the Non-movement Area. Move unescorted in the Non-Movement area. Escort non-badge holders in the non-movement area. Enter the Commercial Ramp (Secured Area) of the airport.					
3.	Which area is designated for commercial carrier operations?						
	a. b. c. d.	The Cement Pad The Secured Identification Display Area (SIDA) The Fort Collins-Loveland JetCenter ramp Runway 06-24					
4.	AOA	AOA Badge holders may operate ground vehicles on Runway 15-33.					
	a. b.	True False					
5.	FNL	Security Badges must be displayed					
	a. b. c. d.	On the exterior of your vehicle Visibly on the outer-most garment and above the waist Monday through Friday 8:00 AM – 7:00 PM When challenged from a TSA officer					

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6.	Which statement(s) apply to parking your car in the Non Movement Area?						
	a. b. c. d.	Is short term only (less than 8 hours). Is not allowed during a snow event. Can be avoided by using the jetCenter Parking lot or your hangar. All of the above					
7.	Badge	e holders can escort					
		1 person at a time No more than 10 people 25 people if it is a special occasion 6 people in the Non-Movement Area					
8.	After	ter entering the Airport through the access lift gate, ALWAYS					
	a. b. c. d.	move out of the way for others waiting their turn. stop and wait until the gate is fully closed before continuing. immediately report persons/vehicles following you through the gate to Loveland Police Department. both b and c.					
9.		OA Badge holders operating ground vehicles in the Non-Movement rea shall					
	a. b. c. d.	Always have the right of way Place reflective stickers on their vehicle for better visibility Always give way to aircraft and emergency vehicles Drive at 40MPH through the hangar area					
10.	Badge	es can be revoked for which reason(s)?					
	a. b. c. d. e. f.	If you operate your vehicle on the Runways and Taxiways. If you escort more than 6 people at a time. If you cause an incursion on the taxiway or in the hangar area. If your badge is not visible worn visibly above the waist. If you drive away from a gate before it is closed. All of the Above.					

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ATTACHMENT B

LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED

Applicants 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	Г	LIST B Documents that Establish Identity	ın	LIST C Documents that Establish Employment Authorization
3.	U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551) Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine- readable immigrant visa Employment Authorization Document that contains a photograph (Form I-766)		Sta Un phenal col 2. ID goo pro info	iver's license or ID card issued by a ate or outlying possession of the nited States provided it contains a cotograph or information such as ame, date of birth, gender, height, eyellor, and address card issued by federal, state or local evernment agencies or entities, by ovided it contains a photograph or formation such as name, date of birth, ender, height, eye color, and address		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 Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)
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		 Vo U.S Mill U.S Ca Na Dri go For I 	ative American tribal document iver's license issued by a Canadian evernment authority persons under age 18 who are hable to present a document	6.	certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
6.	limitations identified on the form. 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		11 . C	Clinic, doctor, or hospital record Oay-care or nursery school record		Department of Florificand Geculity

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