# General Aviation Application Checklist

**Last Name:** ____________________________________________________________

**First Name:** __________________________________________________________

**Middle Name:** _________________________________________________________

**Employer:** ____________  **Aircraft:** ________________  **Hangar:** __________

**Date of Application:** ________________

## Application Verification

<table>
<thead>
<tr>
<th>Description</th>
<th>Verified By:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completed General Aviation Application</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Signed Privacy Act</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Signed AOA Rules and Regulations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Copy of ID(s) in Compliance with Current I-9 Form</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sublease or Ownership Paperwork Complete – Verified by Admin</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Security Verification

<table>
<thead>
<tr>
<th>Description</th>
<th>Verified By:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enter Applicant into TSC Website</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cleared TSC Security Threat Assessment Attach STA to Application</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Badging System

<table>
<thead>
<tr>
<th>Description</th>
<th>Verified By:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Verify in Avigilon</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Badge ID Number:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Badge Token:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Badge Photo</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Print Badge</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Application Processing

<table>
<thead>
<tr>
<th>Description</th>
<th>Verified By:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicant GA Security Training</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Required Drivers Training (Movement or Non Movement area)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Collect Payment (Enter into Billing Spreadsheet)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Supervisor Verification

<table>
<thead>
<tr>
<th>Description</th>
<th>Verified By:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete GA Application</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Signed Privacy Act</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Signed Rules</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Copy of ID(s) using I-9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>STA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scan into EEDOCS</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### SECURITY BADGE ACCESS APPLICATION

- **USE BLACK OR BLUE INK ONLY**

**ITEMS 1 THRU 4 MUST BE COMPLETED BY THE AUTHORIZED SIGNATORY AND ARE REQUIRED FOR PROCESSING.**

Security Badge Authorization form must be completed for individuals without an Authorized Signatory

<table>
<thead>
<tr>
<th>1. REASON FOR APPLICATION: (Must check one only)</th>
<th>□ New □ Renew □ Upgrade/Downgrade □ Lost/Stolen □ Damaged □ Reactivate/Retraining</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. BADGE TYPE REQUESTED: (Must check one only)</td>
<td>□ SIDA □ Sterile Area □ General Aviation</td>
</tr>
<tr>
<td>3. DRIVERS TRAINING: (Must check one only)</td>
<td>□ Drivers Training <strong>REQUIRED</strong> □ Drivers Training <strong>NOT REQUIRED</strong></td>
</tr>
</tbody>
</table>

**4. AUTHORIZED SIGNATORY**

I attest the individual applicant listed below has a specific need for unescorted access and the individual applicant acknowledges their security responsibilities under 49 CFR 1540.105(a)

Authorized by (print) ____________________________________________  Title (print) __________________

Signature ______________________________________________________  Date __________________

Agency ________________________________________________________  Badge Type__________________

**ITEMS 5 - 32 MUST BE COMPLETED BY THE APPLICANT AND REVIEWED BY THE AUTHORIZED SIGNATORY. PLEASE PRINT CLEARLY.**

<table>
<thead>
<tr>
<th>5. LAST NAME</th>
<th>6. FIRST NAME</th>
</tr>
</thead>
</table>

7. MIDDLE NAME

8. SOCIAL SECURITY #

9. LIST ALL ALIAS/MAIDEN NAMES

10. STREET ADDRESS

11. CITY

12. STATE

13. ZIP CODE

14. COUNTRY

15. TELEPHONE #

16. HEIGHT ft. in.

17. WEIGHT lbs.

18. GENDER

19. DATE OF BIRTH

20. RACE

21. EYE COLOR

22. HAIR COLOR

23. COUNTRY OF CITIZENSHIP

24. PLACE OF BIRTH (U.S. STATE or COUNTRY)

25. PASSPORT #

26. PASSPORT COUNTRY

27. I-9 DOCUMENTS □ Non Immigrant VISA □ I-94 Form (If checked, must complete #29)

28. I-9 DOCUMENT #

29. ALIEN REGISTRATION #

30. U.S. CERTIFICATION OF BIRTH ABROAD (DS-1350 or FS-545)

31. Employer/Aircraft/Hangar

32. EMAIL

Vehicle Year Make, Model, Plate, State

Vehicle Year Make, Model, Plate, State

Revised: 11/09/2022
PRIVACY ACT NOTICE STATEMENT


Purpose: The Department of Homeland Security (DHS) will use the information to conduct a security threat assessment. If applicable, 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).

DHS will also maintain a national, centralized revocation database of individuals who have had airport- or aircraft operator-issued identification media revoked for noncompliance with aviation security requirements. DHS has established a process to allow an individual whose name is mistakenly entered into the database to correct the record and have the individual’s name expunged from the database. If an individual who is listed in the centralized database wishes to pursue expungement due to mistaken identity, the individual must send an email to TSA at Aviation.workers@tsa.dhs.gov.

Routine Uses: In addition to those disclosures generally permitted under 5 U.S.C. § 552a(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. § 552a(b)(3)(A) 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 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: Pursuant to § 1934(c) of the FAA Reauthorization Act of 2018, TSA is required to collect your SSN on applications for Secure Identification Display Area (SIDA) credentials. For SIDA applications, failure to provide this information will result in denial of a credential. For other aviation credentials, although furnishing your SSN is voluntary, if you do not provide the information requested, DHS may be unable to complete your security threat assessment.

APPLICANT CERTIFICATION STATEMENT

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 the Title 18 of the United States Code).

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 fine or imprisonment or both.

________________________________________________________
Applicant Signature Date

________________________________________________________
Applicant Full Name & SSN (Print) Date of Birth

Revised: 11/09/2022
Durango-La Plata County Airport AOA Badge Rules and Guidelines

Aircraft Operations Areas (AOA) ID
Never loan out your ID. **This ID is for you and you only.**
You are required to have AOA badge on you and present the ID when asked.
If you lose your ID report it to the airport as soon as possible. There will be a charge for a replacement ID.
Return the ID to the airport badge office located in the fire station when you no longer need access.
If your ID stops working or is broken bring the ID to the airport badge office.
The ID is the property of the airport and must be surrendered when asked by the appropriate person or entity.

Driving
Aircraft always have the right of way
Always stop and wait at automatic vehicle access gates, vehicle operators entering or exiting an automatic vehicle gate are required to wait within the area of the gate to ensure the gate fully closes and there is no unauthorized access before departing.
Speed limit is 15 on the ramp.
Always stay in the non-movement area, GA Ramps. Never drive or walk into the SIDA areas.
Do not track mud or other debris on the ramp.

Challenging
If you see something or someone unusual and you feel safe; go and challenge that person(s). Ask politely for their AOA ID, and inquire about what they are doing. If the person can produce an airport issued ID, and their actions appear genuine, no further questioning is required.
If the person cannot produce a valid airport issued AOA ID or is not under the escort of someone who has and AOA ID, ask them to come with you and escort them to a public part of the airport (i.e. outside the fence) and contact the Airport Security Coordinator.
If the person refuses to cooperate or is otherwise determined to pose a risk to the security of the airport, call 911 then contact the Airport Security Coordinator. If you feel a challenge could result in you being harmed. Do not challenge them. Call 911.

Other
If you escort someone into the AOA you are responsible for their behavior and actions. Keep all non-badged individuals within ear and eyesight at all times.
Do not tamper with or disable any security feature(s). If you find a security feature is not working contact airport operations.
Do not disclose sensitive security information. This includes codes, combinations, security vulnerabilities, or attempted acts against civil aviation. Refer all requests for this type of information to the airport administration office.

New & Renew badge; $25.00, Replacement of damaged badge $25.00
There will be a 1st time fee of $75.00 for replacing a lost or stolen card, 2nd time $100.00, 3rd time $100.00.
Charge to employer if ID is not returned $200.00

Failure to obey these rules will result in the revocation of your AOA badge privileges. You may be subject to fines and penalties.

I agree to follow the rules and regulations listed above. I know that if I do not I will have my AOA privileges revoked, and subject to civil fines, and or criminal charges.

Print Name: _______________________ Signature _______________________ Date ____________

If you have any questions contact the Airport Security Office 970-382-6053 or at 970-759-4342

ASC Dennis Ray: 970-764-5831
Operation Cell #: 970-759-4342
Airport Administration: 970-382-6050

Revised: 11/09/2022
Durango-La Plata County Airport AOA Badge Rules and Guidelines

APPLICANT COPY

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If your ID stops working or is broken bring the ID to the airport badge office.
The ID is the property of the airport and must be surrendered when asked by the appropriate person or entity.

Driving
Aircraft and emergency equipment always have the right of way
Each vehicle entering an access point must use their Airport ID to gain entry. If the vehicle operator does not have an Airport ID they must be under escort.
Always stop and wait at automatic vehicle access gates, vehicle operators entering or exiting an automatic vehicle gate are required to wait within the area of the gate to ensure the gate fully closes and there is no unauthorized access before departing.
Speed limit is 15 on the ramp.
Always stay in the non-movement area, GA Ramps. Never drive or walk into the SIDA areas.
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If you have any questions contact the airport security office.
Airport Admin 970-382-6051 Airport Security Office 970-382-6053 or 970-759-4342
Durango-La Plata County Airport
Airport Security Program

Security Badge Authorization

This form is required for all individuals without an Authorized Signatory

Do you own or operate an aircraft based at the Durango-La Plata County Airport?  YES / NO

Do you own an aircraft hangar at the Durango-La Plata County Airport?  YES / NO

Are you an employee of a business operating at the Durango-La Plata County Airport?  YES / NO

Are you an employee of a hangar owner at the Durango-La Plata County Airport?  YES / NO

Are you an employee of a federal, state, or local agency operating at the Durango-La Plata County Airport?  YES / NO

If you haven’t answered YES to any of the above questions, please describe your operational need for a badged access at the airport

________________________________________________________________________________________________________________________________________________________

Applicant Name________________________________ Date_________________________

Applicant Signature_____________________________

Aircraft N#, hanger#, Business Name, Agency Name________________________________________________

Approved Signer

As an Approved Signer, I do attest that the above security identification badge applicant has accurately identified their affiliation with the business, hangar, or agency that I represent, and has a direct operational need to access secured areas of the Durango-La Plata County Airport. I further attest to immediately notify the Airport in the event that the above applicant is no longer affiliated with the business, hangar, or agency that I represent, or if the above applicant no longer has an operational need to access secured areas of the Airport.

Affiliated business, hangar, or agency___________________________________________________________

Signatory Name________________________________ Date_________________________

Signatory Signature_____________________________

______________________________________________________________________________________________

Airport Approval

Airport Representative Signature_____________________________________Date______________________

Revised: 11/09/2022