

#### **Monterey Regional Airport**

200 Fred Kane Drive, Suite 200 Monterey, CA 93940 (831) 648-7000 / Fax (831) 649-8243

## **Sterile Area Identification Badge Application**

$\square$ New $\square$	Renewal	<u> </u>									
Badge Type: Sterile	Badge #:		SC	A Access Le	evel:	None		A	irport Code: MRY	Categor	y: III
			S	ECTIO	N 1						
Full Legal Name (Last name, First Name, Middle)			Iiddle Name	e)	Other names used (nicknames, aliases, maiden nam					ne)	
Current Mailing Address					City			State	e Zipcode		
Daytime Telephone Number			Alternate Phone Number				Drivers License Number			State	
Sponsor	/ Hanga	r Number					<b>'</b>				
			S	ECTIO	N 2						
Date of Birth	Socia	l Security Number	Sex				Eye C	e Color Height		Weight	
		,									
Country of Birth	Cour	ntry of Citizenship	US	Citizens	Borr	Abro	oad or N	aturali	zed US Citize	ns Provide	<b>:</b>
US Pass			US Passpo	ort				ertificate of Bir	ficate of Birth Abroad/Form		
			Number	Nat	turali	zation	Number	DS-	1350/10 Digit	Document	Number
State of Birth (If	born in U	J. <b>S</b> .):									
Non-Immigrant Visa Holders Provide:			If not a US Citizen, Please Provide:								
Visa Control Number			Alien Registration Number			r	I-94 Arrival/ Departure Form Number				
Signature					Da			Date			
E-mail Address (	optional)	:									
Attention: Vetting Progra	ms (TSA-10)/	tration to release my Social Sec Aviation Worker Program, 659	5 Springfield Cente	er Drive, Sprin	ngfield, '	VA 20598	3-6010.			J	
<ul> <li>I am the individual to wh</li> </ul>	om the inform	ation applies and want this info	rmation released to	o verify that n	ny SSN	is correct.	. I know that	if I make a	any representation that	I know is false to	o obtain

- information from Social Security Records, I could be punished by a fine or imprisonment or both.
- SCREENING NOTICE: Any employee holding a credential granting access to a Sterile Area may be screened at any time while gaining access to, working in, or leaving the Sterile Area.
- 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 United States Code).

\*\*\*\*\$90.00 Fee for all Lost or Stolen Sterile Area Badges\*\*\*\*

	AUTHORIZED SIGNA	TORY				
Company Nama	Authorized Signatory	Autho	orized Signatory	Authorized Signatory		
Company Name	Job Title (Signature)		(Signature)	(Print Name)		
Address	City	State	Zip Code	Work Phone		



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### **CRIMINAL HISTORY STATEMENT**

I certify that I have not been convicted, or found not guilty of by reason of insanity of any of the disqualifying crimes listed below:

YES	NO	
		Forgery of Certificated, false marking on an aircraft, and other aircraft
		registration violations; 49 USC 46306
		Interference with air navigation; 49 USC 46308
		Improper transportation of hazardous material; 48 USC 46312
		Aircraft piracy; 49 USC 46502
		Interference with flight crew members or flight attendants; 49 USC 46504
		Commission of certain crimes aboard aircraft in flight; 49 USC 46506
		Carrying a weapon or explosive aboard an aircraft; 49 USC 46505
		Assault with an intent to murder
		Espionage
		Sedition
		Kidnapping or hostage taking
		Treason
		Rape or aggravated sexual abuse
		Unlawful possession, use, sale, distribution, or manufacture of an explosive
		or weapon
		Extortion
		Armed robbery or felony unarmed robbery
		Distribution of, or intent to distribute a controlled substance
		Felony arson
		Conveying false information and threats; 49 USC 46507
		Aircraft piracy outside the special aircraft jurisdiction of the United States; 49 USC 46502(b)
		Lighting violation involving transporting controlled substances; 49 USC 46315
		Unlawful entry into an aircraft or airport area that serves air carriers or
		foreign air carriers contrary to established security requirements; 49 USC 46314
		Destruction of an aircraft or aircraft facilities; 49 USC 32
		Murder
		A felony involving a threat
		A felony involving:
		Willful destruction of property
		Importation or manufacture of a controlled substance



Burglary

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## **CRIMINAL HISTORY STATEMENT**

		Theft					
		Dishonesty, fraud, or misrepresentation					
		Possession or distribution of stolen property					
	Aggravated assault						
		Bribery					
		Illegal possession of a controlled substance punishable by a maximum term of more than one year					
		Violence at International Airports; 18 USC 37					
		Conspiracy or attempt to commit any of the aforementioned criminal acts					
Initia	to	ederal Regulations 49 C.F.R. 1542.209 (I) imposes a continuing obligation to disclose the airport operator with 24 hours if you are convicted of any of the listed disqualifying fenses that occur while you have unescorted access authority.					
applica	nt. I und	iminal record received from the FBI will be provided if requested in writing by the erstand that my point of contact for any questions regarding the results of my CHRC will Airport Security Coordinator (ASC).					
knowle stateme	dge and	that I have provided on this application is true, complete and correct to the best of my belief and is provided in good faith. I understand that knowing and willful false his application can be punished by fine or imprisonment or both (see Section 1001 of					
PRINT	NAME O	F APPLICANT:					
SIGNA	TURE OF	APPLICANT: DATE:					
Signa <sup>-</sup>	TURE OF	WITNESS: DATE:					



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

#### TSA Privacy Act Statement

# MONTEREY REGIONAL AIRPORT

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**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 110-53, August 3, 2007); FAA Reauthorization Act of 2018, § 1934(c) (132 Stat. 3186, Public Law 115-254, Oct. 5, 2018), and Executive Order 9397 (November 22, 1943), as amended.

**Purpose**: The Department of Homeland Security (DHS) will use the 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).

DHS will also maintain, 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. 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 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 may 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