

FBO ACCESS APPLICATION HPN AIRPORT ID DATABASE

Please Type or Print

1. _____	2. _____
First Name	Aliases / Additional Names

4. _____	5. _____	6. _____
Employer and Facility	Date of Employment	Job Title

7. _____	8. <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
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Place of Birth	Social Security Number
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9. _____	10. _____	11. _____	12. A# _____
Driver's License Number	State	Citizenship	Alien Registration Number

13. _____	14. _____	15. _____
Other Immigration doc. - type	Immigration document number	Exp. date of Immigration Status

16. Gender: M F	17. Date of Birth: _____	18. Race: _____
	MM / DD / YYYY	

19.. _____	20. _____	21. _____	22. _____
Height	Weight	Hair Color	Eye Color

23. Home Address:

_____	_____	_____	_____
Street	Town or City	State	Zip Code

24. (_____) _____ - _____
Daytime Telephone Number

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)

Print Name of Applicant

Applicants Signature

Date

PRIVACY ACT NOTICE FOR APPLICATION FOR FBO RAMP ACCESS

Authority: The Authority for collecting this information is 49 U.S.C 114, "The Transportation Security Administration", and 49 U.S.C 44936, "Employment Investigations and Restrictions".

Purpose: This information is needed to verify your identity and to retrieve your Criminal History Record to evaluate your suitability for access to a FBO and/or NetJets ramp areas. Your Social Security Number (SSN) will be used as your identification number in this process and to verify your identity. Furnishing this information, including your SSN is voluntary; however, failure to provide it will prevent the completion of your Criminal History Record Check, without which you may not be granted FBO and/or NetJets ramp access.

Routine Uses: Routine use of this information includes disclosure to the U.S. Office of Personnel Management for processing and data verification, to the FBI to retrieve your Criminal History Record, to TSA contractor or other agents who assist in the maintenance and operation of the fingerprint system, to airport operators or aircraft operators to evaluate suitability for FBO and/or NetJets ramp access, to appropriate governmental agencies for law enforcement or security purposes, or in the interests of national security, and to foreign and international governmental authorities in accordance with law and international agreement.

By signing this application, you attest and agree that you have not been convicted, or found not guilty by reason of insanity of any of the offences listed below in the past 10 years. This application also services as notice to Federal regulations (under 49 C.F.R § 1542.209) impose a continuing obligation on you to disclose to Westchester County Airport within 24 hours if you are convicted or found guilty by reason of insanity of any of the criminal offenses listed below. You should make any such disclosure to the Airport Security Coordinator. Westchester County airport administration reserves the right to deny or issue a FBO badge. The issuance of a FBO badge is decided by the Westchester County Airport ASC. The criteria used in the decision making process may exceed the federal standards required to obtain an airport SIDA badge.

Disqualifying Criminal Offenses:

Forgery of certificates, false marking of aircraft, and other aircraft registration violation. √ Interference with air navigation. √ Improper transportation of a hazardous material. √ Aircraft piracy. √ Interference with flight crew members or flight attendants. √ Commission of certain crimes aboard aircraft in flight. √ Carrying a weapon or explosive aboard aircraft. √ Conveying false information and threats. √ Aircraft piracy outside the special aircraft jurisdiction of the United States. √ Lighting violations involving transporting controlled substances. √ Unlawful entry into an aircraft or airport area that serves air carriers or foreign air carriers contrary to established security requirements. √ Destruction of an aircraft or aircraft facility. √ Murder. √ Assault with 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 or felony unarmed robbery. √ Distribution of, or intent to distribute, a controlled substance. √ Felony arson. √ Felony involving a threat. √ Felony involving: willful destruction of property; importation or manufacture of a controlled substance; burglary; theft; dishonesty, fraud, or misrepresentation; possession or distribution of stolen property; aggravated assault; bribery; or illegal possession of a controlled substance punishable by a maximum term of imprisonment of more than 1 year. √ Violence at international airports. √ Conspiracy or attempt to commit any of the criminal acts listed in this paragraph or a finding of not guilty by reason of insanity.

Print Name of Applicant

Applicants Signature

Date

TO BE FILED WITH WESTCHESTER COUNTY AIRPORT ADMINISTRATION

IDENTIFICATION REQUIRED FOR FINGERPRINTING

Two forms of Government issued ID must be presented to the issuing officer prior to the Livescan Fingerprinting and an application filed with Westchester County Airport Administration. Listed below are the accepted forms of ID. One form must be presented from each column, totaling two different forms of identification.

To ensure accurate fingerprinting processing, it is strongly suggested that one of these forms be a Social Security Card.

Applicants Printed Name and Company

To Be Completed By Airport

Issuing Officer must circle the forms of ID presented from appropriate columns

LIST A Document that establish identity and employment eligibility	OR...	LIST B Documents that establish identity	AND	LIST C Documents that both establish employment eligibility
1. U.S. Passport (unexpired or expired) 2. Certificate of U.S. Citizenship (INS Form N-550 or N-570) 3. Certificate of Naturalization (INS Form N-550 or N-570) 4. Unexpired foreign passport, with I-551 stamp or attached INS Form I-94 indicating unexpired employment authorization 5. Permanent Resident Card or Alien Resident Receipt Card with photograph (INS Form I-151 or I-551) 6. Unexpired Temporary Resident Card (INS Form I-688) 7. Unexpired Employment Authorization Card (INS Form I-688A) 8. Unexpired Reentry Permit (INS Form I-327) 9. Unexpired Refugee Travel Document (INS Form I-571) 10. Unexpired Employment Authorization Document issued		1. Driver's license or ID card issued by a state 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 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 3. School ID Card with a photo 4. Voter's registration card 5. U.S. Military card or draft record 6. Military Dependent's ID Card 7. U.S. Coast Guard Merchant Mariner's Card 8. Native American Tribal document 9. Driver's License issued by a Canadian government authority 10. School record or Report Card 11. Clinic, doctor, or hospital record 12. Day-Care or Nursery School record		1. U.S. Social Security Card issued by the Social Security Administration (other than a card stating it is not valid for employment) 2. Certification of Birth Abroad issued by the Dept. of State (Form FS-545 or Form DS-1350) 3. Original or certified copy of a birth certificate issued by a state, county, municipal authority, or outlying possession of the United States bearing an official seal 4. Native American tribal document 5. U.S. Citizen ID Card (INS Form I-179) 6. ID Card for use of Resident Citizen in the United States (INS Form I-179) 7. Unexpired employment authorization document issued by the INS (other than those listed under LIST A)
_____ Issuing Officer's Initials and Date				

PRIVACY ACT NOTICE FOR COLLECTION OF INFORMATION

Social Security Administration Consent

I authorize the Social Security Administration to release my Social Security of Number and full name to the Transportation Security Administration, Office of Transportation Threat Assessment and Credentialing (TTAC), Attention: Aviation Programs (TSA-19)/Aviation Worker Program, 601 South 12th Street, Arlington, VA 22202.

I am the individual to whom the information applies and want this information released to verify that my SSN is correct. I know that 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.

Print Full Name: _____
Last Name, First Name, Middle Name

Date of Birth: _____
mm/dd/yyyy

SSN: _____ - _____ - _____

Signature: _____

Privacy Act Notice

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

Purpose: The Department of Homeland Security (DHS) will use the biographical information to conduct a security threat assessment and will forward any fingerprint information to the Federal Bureau of Investigation to conduct a criminal history records check of individuals who are applying for, or who hold, an airport-issued identification media or who are applying to become a Trusted Agent of the airport operator. DHS will also transmit the fingerprints for enrollment into the US-VISIT's 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's records to ensure the validity of your name and SSN.

Routine Uses: The information may be shared 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 Transportation Security Threat Assessment System (T-STAS), DHS/TSA 002.

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 identification media.

Print Name	Sign Name	Date
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To Be Completed By Employee Upon Receiving ID

I clearly understand all the responsibilities of the Westchester County Airport ID badge holder, as provided to me by the Westchester County Airport Security Department staff.

Received By: _____
Print

Date ID Card Issued: _____

Signature

Company: _____