THE BATON ROUGE METROPOLITAN AIRPORT POLICE\ARFF DEPARTMENT

BATON ROUGE AIRPORT SECURITY PARKING DECAL & IDENTIFICATION CARD APPLICATION

SECTION I – APPLICANT	**STATE BORN IN:**				
Application for ☐ Airport ID Card ☐ Employee parking			**Email:**		
1. Name (Last, First, MI):			**2. Alias (list any)**	**3. Social Security Num.**	
4. Address:			**5. City:**	**6.State:**	**7. Zip Code**
8. Home/Cell Phone:	**9. Work Phone:**		**10. Drivers Lic #:**	**11. Date of Birth:**	
12. Height: **ft in**	**13. Sex:**	**14. Weight:**	**15. Hair color:**	**16. Eye color:**	

17. Airport ID Card Applicants: Fingerprint, criminal history records check, security threat assessment, parking, late, lost card, or any other fees are due at the time of the card issuance. No card will be issued without proper payment.
The Baton Rouge Airport ID Card is the property of the Baton Rouge Airport and it becomes your responsibility to replace if lost or damaged. If you are no longer employed or suspended, you are required to return the ID card to the ID office immediately.
I acknowledge that I have read and fully understand, and agree to abide by the security Responsibility agreement attached to this application. I understand that failure on my part to follow any security procedures may result in the revocation of my ID badge, or legal action against me, and that I may be banned from restricted areas of the Baton Rouge Metropolitan Airport.

18. ID Applicant signature:	**Date:**

19. Parking Card\Decal Applicants: All fees associated with parking in the Baton Rouge Metropolitan Airport Employee Parking Lot are due at the time if the Card\Decal issuance. The Baton Rouge Metropolitan Airport is not responsible for any damage sustained to your vehicle, inside or out, any items stolen from your vehicle, or the theft of your vehicle while parked on the Baton Rouge Metro Airport Premises.

20. Parking Applicant signature:	**Date:**

SECTION II – EMPLOYER \ SPONSOR \ AUTHORIZED SIGNATORY

21. Company Name:	**22. AOA:** ☐ Yes ☐ No

23. Please Bill Our Company for This Employee:

☐ Fingerprinting ☐ Airport ID ☐ Parking

24. Certification: I certify that upon the employee's separation of service or loss of the Airport ID badge, it is my company's responsibility to notify the Airport ID office as soon as possible, not to exceed 12 hours. During normal business hours call (225) 358-4221 or after hours, weekends, and holidays, (225) 355-2068.
My company or agency will reimburse the Baton Rouge Metropolitan Airport for any and all fines, fees, or replacement cost levied by the DHS, FAA,TSA, or any other agency against the Baton Rouge Metro Airport which are caused by the failure of the applicant to adhere to the Baton Rouge Metro Airport Security Program.

25. Authorized Signatory:	**26. Title:**	**Date:**

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SECTION III – MAPD ACCESS CONTROL OFFICE ONLY				
27. Airport ID #:	**28. ID Type:** ☐ Gen. Aviation ☐ SIDA ☐ Terminal Emp.		**29. Pin #:**	**30. Exp .Date:**
31. ID Issue Date:	**32. SIDA Test:** ☐ Yes ☐ No	**33. AOA Test:** ☐ Yes ☐ No	**34. Criminal History Required** ☐ Yes ☐ No	
35. Parking Decal #:	**36. Date Issued:**	**37. Parking Card #:**	**38. Issue Date:**	**39. Lot** ☐ North ☐ South
40. MAPD AGENT NAME:				