

# YEG APPLICATION FORM

Please check the following:

- New Applicant   
  Renewal   
  Transfer   
  Company Change   
  Return to Work  
 Add/Change Secondary Company   
  Prox Card Request   
  Key Request

PART 1 – PARTICULARS OF APPLICANT				
SURNAME (LAST NAME)		GIVEN NAME(S) (FIRST AND MIDDLE NAME(S))		DATE OF BIRTH (YEAR-MO-DAY)
HOME ADDRESS				
CITY			PROVINCE	
POSTAL CODE	CELL PHONE # (INCL AREA CODE)	HOME PHONE # (INCL AREA CODE)	OCCUPATION	
If born IN Canada:		If born OUTSIDE of Canada:		
CITY OF BIRTH		CITY OF BIRTH:		PORT OF ENTRY:
PROVINCE OF BIRTH:		COUNTRY OF BIRTH:		DATE OF ENTRY:
HEIGHT (CM)	WEIGHT (KG)	HAIR COLOUR	EYE COLOUR	EMAIL ADDRESS
EMERGENCY CONTACT (FRIEND OR RELATIVE)				
NAME:		PHONE # (INCL AREA CODE)		

## APPLICANT'S CONSENT AND CERTIFICATION

For the purpose of this application for a Restricted Area Pass (RAP) or a Restricted Area Identity Card (RAIC) I consent to the collection and storage of the personal information on this application form. I understand that the information will be stored in the RAIC and Access Control computer systems of Edmonton International Airport, and that I may obtain a copy of the stored information upon request.

I consent to the collection of the personal information that will be displayed on the RAP or RAIC, and the fingerprint and iris images that will be used to create the biometric template that will be stored on the RAIC.

I consent to the disclosure to the Canadian Air Transport Security Authority (CATSA) of the templates that will be stored on the RAIC.

I certify that all the information set out by me in this application, including any supporting documentation, is true and correct to the best of my knowledge and belief.

- I will not give or loan my card or key(s) to anyone
- I will safeguard the card(s) at all times and report the loss or theft of said card(s) without delay to the issuing authority. A \$300.00 administration fee will be charged for all lost or failed to return cards.
- I will not permit any unauthorized use of the card(s)/ I will ensure the security door/gate is fully closed after my use and I will not permit any unauthorized entry into the restricted area.
- I will not bend, puncture, pierce or laminate the card(s) and will keep the card(s) from heat sources
- I will safeguard the key(s) at all times and report the lost or theft of the key(s) without delay to the issuing authority. A \$50.00 administration fee will be charged for lost or failed to return keys.
- I will not permit unauthorized use or duplication of the key(s)
- I must surrender the key(s) on termination of employment or on demand of the issuing authority or a member of the Airport Security Staff

My signature certifies that I have read, understand and have received a copy of the Conditions of Issue of a RAIC/RAP, keys, and proximity cards and will obey the legally binding conditions.

**NOTE: Consent may be given only by an individual who has reached the age of majority.** Where an applicant is a minor, the signature of a parent, guardian or tutor is mandatory on both this form and the receipt form at Pass Office. The parent, guardian or tutor who signs the consent must be in attendance at the Pass Office while this application is being processed. Photo ID will be required.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

I am the parent, guardian or tutor of the applicant: \_\_\_\_\_  
 Name Signature Date

PARTICULARS OF APPLICANT					
SURNAME - LAST NAME		GIVEN NAME(S) - FIRST AND MIDDLE NAME(S)		DATE OF BIRTH (YEAR-MO-DAY)	
PART 2 – COMPANY INFORMATION AND CERTIFICATE OF REQUESTING OFFICER (COMPANY SIGNING AUTHORITY)					
COMPANY NAME (SPONSOR)			COMPANY PHONE # (INCLUDING AREA CODE)		
COMPANY ADDRESS			CITY/PROVINCE/POSTAL CODE		
COMPANY PROX ACCESS REQUIRED <input type="checkbox"/> YES <input type="checkbox"/> NO		SPECIFIC AREA: _____	EXPIRY DATE OF PROX: _____	<input type="checkbox"/> SAME AS RAIC <input type="checkbox"/> OTHER _____	TYPE OF KEY REQUESTED
<p>I the undersigned, certify that the applicant named above has a requirement for the described Transport Canada Airport Restricted Area Identification Card. <input type="checkbox"/> YES <input type="checkbox"/> NO _____ Initials</p> <p>I also certify that the applicant named above has the requirement for the requested proximity access and requested restricted key(s). <input type="checkbox"/> YES <input type="checkbox"/> NO _____ Initials</p> <p>I further agree that I will notify the aerodrome operator immediately on termination of the pass holder's employment with our company/department and that should the pass holder's pass not be returned to the aerodrome operator for any reason, that our company/department will be subject to a contractual fee set by the aerodrome operator of three hundred dollars (\$300). An additional fee of \$50.00 will also be issued per prox card and key not returned.</p> <p>SIGNATURE OF REQUESTING OFFICER: _____</p> <p>PRINT NAME: _____ DATE: _____</p>					
PASS OFFICE USE ONLY					
<u>RAP #</u>	<u>TYPE OF PASS</u> <input type="radio"/> RAIC/RAP <input type="radio"/> BASEMENT  <u>RAP/BASEMENT PASS</u> DATE OF ISSUE      DATE OF EXPIRY Y M                      Y M		<u>PROX CARD ISSUED</u> <input type="radio"/> YES Card # _____  <input type="radio"/> NO	<u>SIGNING AUTHORITY VERIFIED</u> <input type="checkbox"/> <u>APPLICANT'S DATA VERIFIED</u> <input type="checkbox"/>  PCO Signature: _____	
<u>KEY TYPE/NUMBER</u>			<u>NUMBER OF KEYS ISSUED</u>		<u>PCO VERIFICATION</u>
<u>PCO INITIALS</u>	<u>SRCCS FILE NO.</u> 1808 - _____	<u>DATE RECEIVED</u> Y M D	<u>CLERANCE EXPIRY</u> Y M D		<u>US APPROVED</u> <input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> EXEMPT
TSCA #: _____				RAIC #	
PCO SIGNATURE: _____				RAIC EXPIRY DATE      Y M D	
DATE: _____ Y M D				CCURE #	