Concord-Padgett Regional Airport Badge Request Form

This section must be completely filled out & signed by applicant, and then verified and signed by the authorized signer

Last Name _____ First Name _____ Full Middle Name _____ Nickname (if applicable) _____

**Note: Name must be printed as it appears on valid government issued picture ID that they will present at time of badging.*

Date of Birth _____ Gender _____ State of Birth (& Country) _____ Country of Citizenship _____

Address (Street, Apt#, City, State, Zip): _____ Cell Phone (or best contact #): _____

Applicant Email Address: _____ Company Name or Aircraft No. _____ Job Title / Position (or Hangar #) _____

Applicant's *Signature* _____ Date Form Completed _____

AIRPORT AUTHORIZED SIGNER SECTION

Badge Request Info:

Badge Type (check one): ☐ SIDA; ☐ Sterile; ☐ Public Area; ☐ AOA City; ☐ AOA HIC; ☐ AOA Temp. ; ☐ AOA T-Hangar; ☐ AOA Tie-Down; ☐ AOA Construction/ Contractor; ☐ AOA Tenant Employee

Transaction Type	Access Area(s) Needed	Needed Endorsements
☐ **New Badge Request**	☐ SIDA	☐ Non-Movement Driver
☐ Replace Active Badge Badge Number: _____	☐ Secure	☐ Escort
☐ Renew Active Badge Badge Number: _____ Expiration Date: _____	☐ Sterile	☐ Authorized Signer
☐ Reactivate Expired, Or Suspended Badge	☐ Public	☐ Movement Area Driver
☐ Replace Lost or Stolen Badge	☐ AOA	☐ Public Area (Airline Bld. employee parking lot access)

TRAINING / Completion Date & Test Grade

☐ **SIDA** **Date:**_____

☐ Non-Movement **Date:**_____

☐ **RECURRENT** **Date:**_____

☐ Movement Area **Date:**_____

☐ **AUTHORIZED SIGNER** **Date:**_____

☐ **REMEDIAL** **Date:**_____

Note: Place "N/A" next to Date in not required

Signature of Individual Picking up Badge: _____

I certify that: If being submitted under 49 CFR 1542, I certify the applicant was advised CHRC may be conducted. I reviewed the information and statements on this application and the ID Badge Application and then signed and dated the application only after all information was completed and verified. I will immediately notice Concord-Padgett Regional Airport's Airport Security Coordinator if there is any change in eligibility for a badge, access, or endorsement.

Submitted Under:

*check only one

☐ Part 1542 Airport

☐ TSA Employee

☐ LEO Exemption

Company Name _____ Contact Phone _____

Print Name _____ Title _____

Airport Authorized Signature _____ Date _____

CRA OFFICIAL USE ONLY

Received By (& Date) _____ Processed By (& Date) _____

Date Issued _____ Issued By _____

Badge Number _____ Expiration _____

ID Documents Provided: Number: _____
Type: _____ **Expires:** _____
PHOTO Date: _____ **Noverant Assigned:** _____
TSC Updated: _____ **ID Works Updated:** _____
CCURE:# _____ **Access:** _____

Payment Date:_____ **Amount:**_____