



Access Badge Application

Section 1 - Applicant Information

PURPOSE OF APPLICATION					
<input type="checkbox"/> New	<input type="checkbox"/> Renew	<input type="checkbox"/> Change (add driving, title changes, etc.)	<input type="checkbox"/> Company or Department Name Change	<input type="checkbox"/> Name Change (supporting document required)	<input type="checkbox"/> Replacement
FIRST NAME (LEGAL)		MIDDLE NAME (LEGAL)		LAST NAME (LEGAL)	
Other Legal Names Used (please list all, including maiden name)					
DATE OF BIRTH (mm-dd-yyyy)		BIRTHPLACE (City and State)			
Join MASP Mass Notification? <input type="checkbox"/> YES <input type="checkbox"/> NO			TELEPHONE NUMBERS Cell Phone(____)-____-____ Work Phone(____)-____-____		
HOME ADDRESS Street: _____ Apt# _____ City _____					
HEIGHT	WEIGHT	GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	EYE COLOR	HAIR COLOR	
STATE DRIVERS LICENSE OR IDENTIFICATION CARD NUMBER		STATE	EXP DATE (mm-dd-yyyy)		
E-MAIL ADDRESS					

Section 2 - Vehicle Information

Make: _____		Model: _____			
Year: _____	Color: _____	License No: _____	State: _____		
Make: _____		Model: _____			
Year: _____	Color: _____	License No: _____	State: _____		

Section 3 - Completed by Authorized Signatory

COMPANY NAME		DEPARTMENT		VEHICLE OPERATING AREAS	
REQUESTED ACCESS AREA		Supervisor Name and Telephone Number		<input type="checkbox"/> YES <input type="checkbox"/> NO	RAMP
				<input type="checkbox"/> YES <input type="checkbox"/> NO	TEST SITES
				<input type="checkbox"/> YES <input type="checkbox"/> NO	AOA
AUTHORIZED SIGNATORY		BADGE #	EXP DATE		
E-MAIL ADDRESS				PHONE # (____) _____ - _____	
By signing below the authorized signatory certifies that they have reviewed this application for accuracy and have approved the Mojave Air and Space Port to issue an ID badge to my employee and bill my company the appropriate fees (if applicable)					
SIGNATURE				DATE	



Access Badge Application

Section 4 - To be completed for GA-Hangar access only

T-Hangar #	Aircraft Make	Aircraft Model	N-Number
Emergency contact name		Emergency contact Number	
Emergency contact address			
Emergency contact name		Emergency contact Number	
Emergency contact address			

Section 5 - To be Initialed and signed in presence of Authorized Signatory or MASP Badging Personnel

<p>I acknowledge airport security is everyone's responsibility. I agree to neither aid nor participate in "piggy-backing" (allowing unauthorized access to the airport) no will I otherwise breach, disobey, or disregard any security directive, plan, or program at the airport. Failure to comply with MHV Security Procedures may result in access suspension and possible revocation.</p>	Initial _____
<p>Access to gates and doors are monitored by surveillance cameras and the airport access control system. I will follow the "STOP AND WAIT" procedures at all doors and gates to ensure they are securely closed before leaving the area.</p>	Initial _____
<p>I will immediately notify my Authorized Signatory and MASP Security Office if my ID Badge is lost or stolen. I understand that I am able to receive a replacement badge, at the discretion of my Authorized Signatory or the Airport Security office.</p>	Initial _____
<p>I understand that my MHV ID Badge only allows unescorted access to specifically designated area(s) of the Airport to which I have demonstrated an operational need to access those area(s). I further understand accessing areas other than those authorized may result in penalties up to and including access revocation.</p>	Initial _____
<p>I understand my ID Badge remains the property of the Mojave Air & Space Port (MHV), and is issued for use as I have an operational need for unescorted access, and is not transferable to any other individual. MHV reserves the right to revoke the authorization of my ID Badge where such action is determined to be in the best interest of airport security.</p>	Initial _____
<p>I will present my badge when requested to do so by Airport Security or any authorized agent with the Mojave Air & Space Port management team.</p>	Initial _____
<p>I understand that failure to comply with the airport security rules may result in punitive action up to and including access revocation.</p>	Initial _____

By signing this form I agree that all of the above information is true and correct.

Applicant Signature: _____ Date: ___/___/_____

Section 6 - To be completed by MASP Badging Office

Date approved	Badge # assigned	Approved gate access	Access Badge
		<input type="checkbox"/> Gate A02 <input type="checkbox"/> Gate A60 <input type="checkbox"/> Gate A15 <input type="checkbox"/> Gate A32 <input type="checkbox"/> Gate A36 <input type="checkbox"/> Gate A41 <input type="checkbox"/> Gate A52	<input type="checkbox"/> AOA <input type="checkbox"/> T-Hangar <input type="checkbox"/> ALL AREAS <input type="checkbox"/> FLIGHT LINE <input type="checkbox"/> STORAGE <input type="checkbox"/> TEST SITE <input type="checkbox"/> INDUSTRIAL
Approved by			
Date Returned	Badge # returned		