

AUTHORITY TO DRIVE AIRSIDE APPLICATION
Category 3 & 4



Please circle: Initial Application **or** Renewal

Please circle: Category 3 (Yellow) **or** Category 4 (Red)

I. APPLICANT

Name: **(as shown on ASIC)**.....

Position:

Address:.....

.....

Employer:.....

Tel No:.....

Operational activities & locations requiring ADA:

.....

For renewals: Expiring ADA No: Expiry Date:

2. STATE/TERRITORY DRIVER'S LICENCE

Licence No: Class: Expiry Date: / /

3. AVIATION SECURITY IDENTIFICATION (if applicable)

ASIC Card No: Expiry Date: / /

4. ENDORSEMENT BY THE COMPANY (where applicable)

Confirm the above applicant was an employee, and has been deployed airside, prior to 23 March 2009 and therefore does not require pre-deployment testing or

Confirm I have sighted evidence of negative results of pre deployment alcohol and other drug testing in compliance with CASA CASR Part 99 for the above staff member who may be required to operate airside.

Name:

Position: Tel No:

Signed: Date: / /

Email:

5. ACKNOWLEDGEMENT BY THE APPLICANT

I acknowledge that in making this application, I undertake that the vehicle will be operated in conformity with the rules and conditions promulgated by Cairns Airport Pty Ltd in the Airside Vehicle Control Handbook.

Signed: Date: / /

OFFICE USE ONLY

Training course conducted: Date:..... Conducted by:

Practical test completed: Date: Conducted by:

State/Territory Driver's Licence sighted:..... **Y / N**

Authority to Drive Airside No: Issued: / /

Approved by: Expiry: / /

R.O.L. Details: #..... Date: / /

Please return this form to Cairns Airport Reception. Telephone: 4080 6704 (Option 6)