

Application Authority to Drive Airside (ADA)

All persons who drive vehicles on the Airside of Cairns Airport must hold a current Authority to Drive Airside (ADA). ADA's are only issued by Cairns Airport Pty Ltd (CAPL). The requirements of ADA holders are set out in the Cairns Airport Airside Vehicle Control Manual.

SECTION 1 – 3 TO BE COMPLETED BY APPLICANT:

1. Applicant Details

<i>Surname</i>		<i>ASIC No.</i>	
		<i>Expiry Date</i>	
<i>Given Names</i>		<i>Employer</i>	
		<i>Licence No.</i>	
<i>Home Address</i>		<i>Licence Class</i>	
		<i>Expiry Date</i>	
<i>Mobile</i>		<i>Work Telephone No.</i>	
<i>Email</i>		<i>Work Email</i>	

2. Airside Drivers Authority & Aircraft Radio Operators Certification of Proficiency (AROC), if applicable.

ADA No:	Cat:	Course Date:	AROC No:
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3. Acknowledgement by Applicant

In making this Application, I acknowledge and agree that:

- a) I have read and understood the Cairns Airport Airside Vehicle Control Manual (AVCM)
- b) It is a condition of my ADA that I comply with the AVCM and the Rules for Airside Drivers & Penalty Point System.
- c) Failure to comply with the AVCM or the Rules for Airside Drivers & Penalty Point System may result in me accruing demerit points, or having my ADA suspended or withdrawn.
- d) I have read and understood the Privacy Statement included on page 2 of this Application Form.

Signed: Date:/...../.....

Course Nominated: Y / N

Course Date:

/2017

Applicant Confirmed: Y / N

SECTION 4 – 6 TO BE COMPLETED BY APPLICANTS AUTHORISED SIGNATORY:

4. Certification from Authorised Signatory

I certify that the above applicant (Section 1-3) is required to operate vehicles/equipment at Cairns Airport – please tick the appropriate box for ADA applicant.

- | | | | |
|--|---------|--|---------|
| <input type="checkbox"/> Category 1A – Dedicated Areas | \$50.00 | <input type="checkbox"/> Reprint ADA | \$30.00 |
| <input type="checkbox"/> Category 1B – General Aviation Only | \$50.00 | <input type="checkbox"/> Renewal ADA | \$30.00 |
| <input type="checkbox"/> Category 1C – Airside perimeter Road | \$50.00 | <input type="checkbox"/> Change of details on ADA Card | \$30.00 |
| <input type="checkbox"/> Category 2 – 1B & 1C plus Aprons | \$60.00 | | |
| <input type="checkbox"/> Category 3A – Taxiways & Designated Runway Crossings | \$70.00 | | |
| <input type="checkbox"/> Category 3B – Taxiways only | \$70.00 | | |
| <input type="checkbox"/> Category 4 – All Movement Areas | \$70.00 | | |

Date Collected:/...../.....

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5. Acknowledgement by the Authorised Signatory

In certifying this Application, I acknowledge and agree that:

- a) I certify that the above applicant (Section 1) will undertake the mandatory 10 hours of supervised driving over a 2 week period by a licensed ADA holder of the same or higher category of licence.
- b) I have sighted evidence of negative results of pre-employment alcohol and other drug testing in compliance with CASA CASR Part 99 for the above staff member who may be required to operate airside.
- c) I have read and understood the Cairns Airport Airside Vehicle Control Manual (AVCM).
- d) I have approved the Category ADA based on Employment terms.
- e) I will provide specific training documentation in relation to an airside vehicle/equipment incident.
- f) I have read and understood the Privacy Statement included in this Application.

Name		Signature	
Position/Title		Contact No.	
Organisation		Department	
ASIC No.		Date	

6. Billing Details (who is to be billed for the ADA – MUST BE COMPLETED)

Organisation	Postal Address
Department	Phone
Attention	Email

PRIVACY STATEMENT

The way CAPL manage personal information is governed by the *Privacy Act 1988 (Cth) (Act)* and our Privacy Policy issued in accordance with that Act.

We respect the privacy of your information. Information on this form will be used by Cairns Airport Pty Ltd to process your application. The information may be also used and disclosed where appropriate to comply with our regulatory obligations, to investigate and analyse any incidents or occurrences airside, to maintain our records or communication with you and otherwise in accordance with CAPL's Privacy Policy.

If you provide us with incomplete or inaccurate personal information, we may not be able to process your application.

You can gain access to your personal information. This is subject to some exceptions allowed by law, however we will give you reasons if we deny you access. To request access contact us using the contact details at the bottom of this page.

Please take the time to read our Privacy Policy. It is available on our website at: www.cairnsairport.com.au

OFFICE USE ONLY

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

AROC sighted (if applicable): **Y / N**

Written Test completed: Date:.....

Conducted by: (Comp / NYC)

Log Book completed & correct: **Y / N**

Presentation conducted: Date:.....

Conducted by:

Practical completed: Date:

Conducted by: (Comp / NYC)

Authority to Drive Airside No:

Issued:/...../.....

Expiry:/...../.....

Approved by (print):

Signature:

Date:/...../.....

Please return this form to Cairns Airport: Fax: 4080 6704 Tel 4080 6742 Email: asics@cairnsairport.com.au

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