



**JNU AIRPORT GENERAL AVIATION (GA) BADGE RENEWAL APPLICATION**

Applicant Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

As the company authorized signatory I hereby request that (NAME OF APPLICANT), \_\_\_\_\_ be issued a Juneau International Airport (JNU) Security ID Badge, and hereby attest a need for unescorted access and that the applicant listed above has acknowledged their security responsibilities under 49 CFR 1540.105(a) by reading and signing the Airport Security Rules & Procedures.

Reason for Badge (check one):     **Hangar**             **Aircraft Tie-Down**

**Hangar/Tie-Down Sublease** (Tenant of Record: \_\_\_\_\_)  
(Sublease requires notification of the Airport Business Manager)

**Employee** (Company/Agency Name: \_\_\_\_\_)

**Other:** (Explain: \_\_\_\_\_)

A payment of \$40 (Renewal fee), is required as a condition of issuance of this badge. *Badge/access card must be renewed annually based on applicant's birthday. All badges must be renewed before the badge expires. After 30 days post expiration of badge, badge holder must start an initial application and forfeits the original deposit. The Airport does not send out renewal notices. Annual renewals must be done in-person with two (2) forms of ID (see I-9 List of Acceptable Documents).* A worn or damaged badge will require a \$40 replacement fee for reissuance.

I agree to notify Airport Management within 24 hours of any change to my tenancy, employment or other reason why access is no longer required on the JNU GA AOA. Badge/access card(s) must be returned to the Airport at that time. Failure to notify or return badge/access card will be grounds for forfeiture of deposit. I further agree to notify Airport Management immediately if my badge/access card is lost, stolen, or destroyed. A payment of \$250 will be required prior to issuance of a replacement badge/access card (\$50 badging fee and \$200 lost badge fee).

I understand that I am also required to notify the Airport immediately if I no longer meet the requirements for employment or authorized to be residing in the United States. ID badge/access card does not need to be displayed, but must be immediately available and presented upon request or challenge. Badge/access card will only be used by applicant. I understand that if I loan my badge/access card to anyone, escort another badge holder, or fail to comply with the policy/procedures set forth in this application, my badge/access may be revoked on the airport grounds. I understand that I will be held responsible for any fines, civil sanctions and/or prosecution resulting from a security violation or security breach by my actions.

**Badge Applications**

In accordance with 49 CFR 1542 and the JNU Airport Security Program:

1. The Applicant must complete or have the following prior to issuance of a security ID badge/media:
  - Two forms of identification; one photo ID, one work authorization (see Federal Form I-9)
  - A completed JNU Airport General Aviation GA Badge Application (this form) signed by an authorized signatory.
  - Any required testing for respective badge or special authority/privileges.
2. A Security Threat Assessment (STA) will be submitted as part of the badging application.

An airport security badge is issued to support the applicant's official duties as a condition of their employment. The Juneau Airport has the authority and makes the final determination whether to grant, deny, or revoke a security badge at any time according to the Airport's Security Program pursuant to 49 CFR 1542.209. The Juneau Airport Manager reserves the right to conduct a further investigation of a badge holder at the cost of their employer. Fraudulent claims are punishable to the full extent of the law. **The authorized signatory must ensure that this form has been completed by the applicant in its entirety before signing.**

Applicant Signature: \_\_\_\_\_  
(Original Signature Only)

Company Authorized Signatory: \_\_\_\_\_  
(Required for Sublease/Employee Badge)



## BADGE REQUEST APPLICATION - APPLICANT INFORMATION

### PERSONAL INFORMATION

(Complete if there are any changes from the date of last renewal)

Applicant Name: \_\_\_\_\_ Aliases/Maiden: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Residence: \_\_\_\_\_  
(If different from mailing)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Passport Country: \_\_\_\_\_

Date of Issuance: \_\_\_\_\_

Passport Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

### GENERAL AVIATION SECURITY PROCEDURES AND RESPONSIBILITIES

- **Do Not Loan** Your Badge to anyone, even a co-worker or family member. \_\_\_\_\_ (Initials)
- **Badges are the property of the Juneau International Airport** and may be suspended, revoked or denied access at any time. Additionally, security badges must be surrendered immediately upon demand of the airport. \_\_\_\_\_ (Initials)
- **A Badge holder shall report** security breaches or suspicious activity/persons immediately to the Airport Police. \_\_\_\_\_ (Initials)
- **Report lost or stolen badges** immediately to Airport Police. Fees apply for lost or stolen badges. \_\_\_\_\_ (Initials)
- **A Badge holder is responsible** for any fines, civil sanctions and/or prosecution resulting from a security infraction, violation or security breach by the badge holder. \_\_\_\_\_ (Initials)
- **Users shall take** the most expeditious route between access gate/door and place of business, hangar, or tie down. Vehicles and individuals are not allowed on runway or taxiways. No person or vehicle may be on the main ramp or transit between the East and West sides of the AOA unless authorized by Airport Management. \_\_\_\_\_ (Initials)
- **A badge holder** must have the badge on their person when in GA-AOA areas of the airport and must comply with challenge procedures when requested. \_\_\_\_\_ (Initials)

The information I have provided is true, complete, and correct to the best of my knowledge and belief and is provided in good faith. I understand that a knowing and willful false statement can be punished by fine or imprisonment or both (see Section 1001 of Title 18 of the United States Code)

"I authorize the Social Security Administration to release my Social Security Number and full name to the Transportation Security Administration, Enrollments Services and Vetting Programs, Attention: Vetting Programs (TSA-10)/Aviation Worker Program, 6595 Springfield Center Drive, Springfield, VA 20598-6010.

I am the individual to whom the information applies and want this information released to verify that my SSN is correct. I know that if I make any representation that I know is false to obtain information from Social Security records, I could be punished by a fine or imprisonment or both.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

SSN and Full Name: \_\_\_\_\_