

Lake Charles Regional Airport -- LCH

Airport Identification Access Media Badge Application

(Revised: June 2020)

500 Airport Blvd., Lake Charles, LA 70607 --- (337-477-6051)

<input type="checkbox"/> NEW <input type="checkbox"/> RENEWAL <input type="checkbox"/> REPLACEMENT	ID Badge No.:	Expiration Date:
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Employer/Sponsor Certification Tenant Name and Address: _____ _____ _____	FORM OF PAYMENT: Airport use only <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> CARD <input type="checkbox"/> BILL </div>
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I am a duly authorized signer of the Employer/Sponsor, I am aware of my responsibilities, and hereby request that the individual named below be issued a Lake Charles Regional Airport Identification Badge for access to one the following areas:

- GA AOA SIDA-Secured Sterile Requires Escort Privileges

ACCESS AREA REQUESTED: _____

Signature of Authorized Signer: _____ **Date:** _____

Applicant is a: Employee Tenant Customer Contractor

Applicant's Full Name (print): _____

Signature: _____

I hereby authorize any agent or other authorized representative of the Lake Charles Regional Airport bearing this release to obtain information relating to my activities in conjunction with an investigation to determine eligibility for security clearance for access to the Lake Charles Regional Airport. This information may include, but is not limited to, residential, employment, educational, and conviction records, I/AW E.O. 10450, E.O. 12065, 5 USC 1304& 3301; 42 USC2165 and 2455; 49 CFR 1542.

Below this line is for airport use.

TRAINING: <input type="checkbox"/> SIDA <input type="checkbox"/> STERILE <input type="checkbox"/> GA <input type="checkbox"/> VEHICLE <input type="checkbox"/> MOVEMENT AREA DATE: _____	Fingerprint Status (If applicable) <input type="checkbox"/> Fingerprints Taken by LCH <input type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared Prints taken by: _____ Date submitted to FBI: _____
Threat Assessment Cleared: <input type="checkbox"/> Y <input type="checkbox"/> N STA Updated/Submitted: _____	RAPBACK ENROLLMENT NEEDED : YES <input type="checkbox"/> NO <input type="checkbox"/>

Trusted Agent: As a Trusted Agent for LCH, I verify accountability of the following procedures:
 _____(initial) I verify that all CHRC and STA data was collected and submitted to TSA, as applicable.
 _____(initial) The applicant ___ is -or- ___ is not cleared for issuance of the ID media.
 Badge issued by: _____ Date: _____

Approved two forms of ID submitted: <input type="checkbox"/> YES	ESCORT ALLOWED/EMPLOYEE BRIEFED <input type="checkbox"/> YES
Exempt applicant PIV or Government ID COPY submitted <input type="checkbox"/> Yes <input type="checkbox"/> No: Reason _____	Agent Approval _____ Supervisor Approval _____

Required for all applicants

Disqualifying criminal offenses.

The Transportation Security Administration TSAR Part 1542 requires that all individuals who apply for unescorted access to an airport's Secured – sterile - SIDA Area undergo a fingerprint-based Criminal History Records Check (CHRC) that does not disclose a disqualifying criminal offense. An individual convicted, or found not guilty by reason of insanity, of any of the disqualifying crimes listed below, in any jurisdiction during the ten years before the date of the individual's application for unescorted access authority, or while the individual has unescorted access authority, cannot be issued an airport secured area / SIDA badge.

<ol style="list-style-type: none"> 1. Forgery of certificates, false making of aircraft, and other aircraft registration violations 2. Interference with air navigation 3. Improper transportation of a hazardous material 4. Aircraft piracy 5. Interference with flight crew members or flight attendants 6. Commission of certain crimes aboard aircraft in flight 7. Carrying a weapon or explosive aboard an aircraft 8. Conveying false information and threats 9. Aircraft piracy outside the special aircraft jurisdiction of the United States 10. Lighting violations involving transporting controlled substances 11. Unlawful entry into an aircraft or airport area that serves air carriers or foreign air carriers contrary to established security requirements 12. Destruction of an aircraft or aircraft facility 13. Murder 14. Assault with intent to murder 15. Espionage 16. Sedition 17. Kidnapping or hostage taking 18. Treason 	<ol style="list-style-type: none"> 19. Rape or aggravated sexual abuse 20. Unlawful possession, use, sale, distribution or manufacture of an explosive or weapon 21. Extortion 22. Armed or felony unarmed robbery 23. Distribution of, or intent to distribute, a controlled substance 24. Felony arson 25. Felony involving a threat 26. Felony involving: <ol style="list-style-type: none"> a. Willful destruction of property; b. Importation or manufacture of a controlled substance; c. Burglary; d. Theft; e. Dishonesty, fraud, or misrepresentation; f. Possession or distribution of stolen property; g. Aggravated assault; h. Bribery; or i. Illegal possession of a controlled substance punishable by a maximum term of more than 1 year. 27. Violence at international airports; 28. Conspiracy or attempt
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- I DO have a disqualifying criminal offense.**
- I DO NOT have a disqualifying conviction of criminal offense.**

I, the undersigned, do not have any of the above disqualifying offenses and I understand that any individual who has been convicted or found not guilty by reason of insanity of the crimes listed above within the previous ten years is legally prohibited from unescorted SIDA access.

I understand that, in the future, in accordance with Federal regulations under 49 CFR 1542.209 imposes a continuing obligation for me to disclose to the Lake Charles Regional Airport within 24 hours if I am convicted of any disqualifying criminal offenses that occurs while I have unescorted SIDA access authority.

The information I have provided on this application 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 on this application can be punished by fine or imprisonment or both. (See section 1001 of Title 18 United States Code.)

Signature **Date**

In accordance with the Transportation Security Administration TSAR Part 1542.209, a copy of the criminal record received from the FBI will be provided to an individual only if requested in writing. The Airport Security Coordinator will address any questions concerning the results of the criminal history records check (CHRC).

If an individual receives notice that a disqualifying crime was returned from their FBI criminal history records check, and the individual questions the validity of the criminal record, the individual must notify the Lake Charles Regional airport within 30 days in writing of his or her intent to correct any information he or she believes to be inaccurate. If no notification is received from the individual, Lake Charles Regional Airport may make the final determination to deny unescorted access authority.

Full Legal Name: (Last, First, Middle)		Aliases or Nickname	
Street Address: City / State / Zip:			
Home Phone: () Work Phone: ()		Email address:	
*Place of Birth (Country Code): <input type="checkbox"/> U.S. <input type="checkbox"/> Other: _____			What U.S. state were you born in? (e.g. LA)
*Citizenship Country Code: <input type="checkbox"/> U.S. <input type="checkbox"/> Other: _____			
<input type="checkbox"/> Permanent Resident with Alien Card		<input type="checkbox"/> Alien Registration Number: _____	
<input type="checkbox"/> Non-Immigrant Visa No.: _____		<input type="checkbox"/> Other Visa Type / No.: _____	
Sex: <input type="checkbox"/> F <input type="checkbox"/> M	DOB:	Social Security No.:	
Weight:	Height:	Hair Color:	Eye Color:
Race: <input type="checkbox"/> White <input type="checkbox"/> Latino <input type="checkbox"/> Black <input type="checkbox"/> Asian <input type="checkbox"/> Other			
Employer			
Identification (2 forms ID required for all badges, one pictured government issue – see list below)			
<input type="checkbox"/> Drivers License number _____ State: _____ Exp. Date: _____ <input type="checkbox"/> Passport			
<input type="checkbox"/> Birth Cert. <input type="checkbox"/> Social Security Card <input type="checkbox"/> Other _____ (attach copies)			
Vehicle Year / Make / Model _____			
Color: _____		License Plate No.: _____	
Aircraft Year / Make / Model _____			
Color: _____		Registration No. _____	

List of Acceptable Documents for verification of Identity & Employment Eligibility required by SD 1542-04-08C

Choose one document from List A and one document from List B or C, OR If you don't have a List A document, you must present one document from List B and one document from List C for services

List A	OR	List B	AND	List C
Documents that Establish Both Identity and Employment Eligibility		Documents that Establish Identity		Documents that Establish Employment Eligibility
<ol style="list-style-type: none"> U.S. Passport or U.S. Passport Card Certificate of U.S. Citizenship (Form N-560 or N-561) Certificate of Naturalization (Form N-550 or N-570) Permanent Resident Card or Alien Registration Receipt Card (Form I-551) Foreign Passport with temporary I-551 stamp or printed notation on aMRIV Employment Authorization Document (Form I-776) Foreign Passport with arrival/departure record (I-94) Passports from the Federated States of Micronesia or the Republic of the Marshall Islands with Form I-94 or Form I-94A <p>Note: A government issued ID (i.e. Driver's license or State ID card) can be used as the second document for Fingerprinting and ID services</p>		<ol style="list-style-type: none"> Driver's License or ID card issued by a U.S. state or outlying possession ID card issued by U.S. federal, state or local government agency School ID card with a photograph Voter registration card U.S. Military card or draft record Military dependent's ID card U.S. Coast Guard Merchant Mariner Card Native American tribal document Driver's License issued by a Canadian government authority <p>For persons <u>under the age of 18</u> who are unable to present a document listed above</p> <ol style="list-style-type: none"> School record or report card Clinic, doctor or hospital record Day-care or nursery school record 		<ol style="list-style-type: none"> Social Security card issued by the Social Security Administration (other than a card stating it is not valid for employment) Certification of Birth Abroad issued by the Department of State (Form FS-545) Certificate of Report of Birth issued by the Department of State (Form DS-1350) U.S. Birth Certificate (original or certified copy) Native American tribal document U.S. Citizen ID Card (Form I-197) ID Card for use of Resident Citizen in the U.S. (Form I-179) Unexpired employment authorization document issued by U.S. Department of Homeland Security (other than those listed under List A)

Employer Name and Address:

Lake Charles Regional Airport
Lake Charles Regional Airport - Threat Assessment Supplement

Certifications

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 of 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, Office of Transportation Threat Assessment and Credentialing (TTAC), Attention: Aviation Programs (TSA-19) / Aviation Worker Program, 601 South 12th Street, Arlington, VA 20598.

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.

SIGNATURE: _____

PRINT FULL NAME: _____

SSN _____ Date of Birth: _____ Date: _____

NOTE: Badge Applications are held for processing and pick up of badges for 30 days only. Forms not processed, or badges not picked up within 30 days will be destroyed and re-application will be required

The Privacy Act of 1974 - 5 U.S.C. 552a(e)(3)

Privacy Act Notice (The following is NOT SSI)

Authority: 6 U.S.C. § 1140, 46 U.S.C. § 70105; 49 U.S.C. §§ 106, 114, 5103a, 40103(b)(3) 40113, 44903, 44935, 44936, and 44105; the Implementing Recommendations of the 9/11 Commission Act of 2007, § 1520 (121 Stat. 444, Public Law 110-52, August 3, 2007); and Executive Order 9397, as amended.

Purpose: The Department of Homeland Security (DHS) will use the biographical information to conduct a security threat assessment. Your fingerprints and associated information will be provided to the Federal Bureau of Investigation (FBI) for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems including civil, criminal, and latent fingerprint repositories. The FBI may retain your fingerprints and associated information in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI. DHS will also transmit your fingerprints for enrollment into US-VISIT Automated Biometrics Identification System (IDENT). If you provide your Social Security Number (SSN), DHS may provide your name and SSN to the Social Security Administration (SSA) to compare that information against SSA records to ensure the validity of your information.

Routine Uses: In addition to those disclosures generally permitted under 5 U.S. C. 221a(b) of the Privacy Act, all or a portion of the records or information contained in this system may be disclosed outside DHS as a routine use pursuant to 5 U.S.C. 522a(b)(3) including with third parties during the Course of a security threat assessment, employment investigation, or adjudication of a waiver or appeal request to the extent necessary to obtain information pertinent to the assessment, investigation, or adjudication of your application or in accordance with the routine uses identified in the TSA system of records notice (SORN) DHS/TSA 002, Transportation Security Threat Assessment System. For as long as your fingerprints and associated information are retained in NGI, your information may be disclosed pursuant to your consent or without your consent as permitted by the Privacy Act of 1974 and all application Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for NGI system and the FBI's Blanket Routine Uses.

Disclosure: Furnishing this information (including your SSN) is voluntary; however, if you do not provide your SSN or any other information requested, DHS may be unable to complete your application for identification media.

Applicant's Copy: tear off and keep

The Privacy Act of 1974 - 5 U.S.C. 552a(e)(3)

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Badge applications will not be process unless required personal identification is submitted, and this entire application is completed and signed by all parties (sponsor and applicant).