

**APPLICATION FOR A DUBLIN AIRPORT ACCESS PERMIT (Form ID-1)****CONDITIONS OF ISSUE**

1. This form must be completed in BLOCK CAPITALS. **Section A must completed by the applicant and Section B must be completed by the company Authorised Signatory.** An Authorised Signatory may not approve their own application.
2. I hereby authorise Dublin Airport Authority plc to make any enquiries in relation to this application that are deemed necessary in the interest of security and for that purpose I consent to having my details checked by An Garda Siochana (such check is repeated at intervals not exceeding 5 years).
3. The applicant must provide one of the following as positive means of identification at the time of Access Permit issue: Passport, Driving Licence or other identification issued by the State containing a photograph, name and address.
4. The applicant must successfully complete the mandatory Module 1 Basic Security Awareness Training Programme prior to the issue of an Access Permit.
5. Applicants seeking permission to drive on Airside areas must produce their full driving licence at time of Access Permit issue.
6. The applicant must pay the appropriate fee for the Access Permit.
7. This application must be returned to the Access & Identification Centre (AIC) at least ten full working days in advance of Access Permit issue.
8. Failure to complete any part of this form will result in the form being returned and the issue of the Access Permit being delayed.
9. Airside (Ramp) access, Airbridge operating facilities and Airside driving will only be permitted following receipt of recognised approvals.
10. You must display and wear your Access Permit in a prominent position at all times while Airside.
11. You must comply with instructions of Airport Police, Authorised Officers or Airport Search Officers.
12. You must surrender your airport Access Permit to an Authorised Officer when requested.
13. You must report lost or stolen permits to the Access & Identification Centre (AIC)/Airport Police immediately:  
**Phone: 814 4262/814 4630 Fax: 814 1250 E-mail: aic@daa.ie**
14. Access Permits are strictly non-transferrable.
15. Access Permits remain the property of Dublin Airport Authority plc. It must be surrendered to the AIC or your Company's Authorised Signatory upon cessation of employment, date of expiry, where authorisation is withdrawn or a new Access Permit is issued for any reason.
16. Authorisation may be withdrawn if an Access Permit appears altered in any way.
17. All holders of Access Permits must familiarise themselves with the Airport Bye-Laws and relevant Airport Directions. (Available for inspection at each Airline, Handling Company or Dublin Airport Authority plc Airside Operations Administration.)
18. Smoking is prohibited at all times on the airside/apron/ramp.
19. An Access Permit does not carry automatic right of entry – Access is only permitted while staffs are on duty carrying out their official duties.
20. Application forms for which no permit is collected within 3 months will be destroyed and reapplication will be required. Access Permits not used within a three month period are liable to be suspended without prior notice.

**I agree to comply with the above conditions of issue.**



**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**SECTION A - APPLICANT PERSONAL INFORMATION** – To be completed only by applicant

Is this your first time applying for a Dublin Airport Access Permit? Yes \_\_\_\_\_ No \_\_\_\_\_

If No, with which company did you hold an Access Permit? \_\_\_\_\_

What was your Access Permit reference number?  
\_\_\_\_\_ (Located in white box at bottom of Access Permit)

Do you have any criminal convictions? Yes \_\_\_\_\_ No \_\_\_\_\_ Details \_\_\_\_\_

Title: Mr/Mrs/Miss/Ms (circle as appropriate)	Forename:	Surname:  Maiden Name:
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Present Home Address: _____ _____ _____	Original Home Address: _____ _____ _____
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Date of Birth: ___/___/_____ (dd/mm/yyyy)	Nationality:
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Home Phone Number	Mobile Phone Number:
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Employer Name: _____ Employer Business Address: _____ _____ _____	Employer Telephone Number: _____ Job Department: _____ Job Title: _____ Staff No: _____
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**TO BE COMPLETED BY APPLICANT AT AIC AT TIME OF ACCESS PERMIT ISSUE**

I hereby acknowledge receipt of:

- i. My Access Permit
- ii. Dublin Airport Security Briefing

I understand and will comply with the responsibilities of being an Access Permit holder and accept that failure to comply with Dublin Airport's Bye-Laws and Security Regulations may result in the withdrawal of my Access Permit. I hereby declare that the above information is both true and correct and any misrepresentation may result in denial of or withdrawal of my Access Permit. I hereby acknowledge that I am not authorised to commence unescorted airside (Ramp) duties until successful completion of DAA approved Airside Safety training, Airside (Ramp) Driving Training and ramp familiarisation where appropriate.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR AIC USE ONLY:**

The applicant produced the following evidence of his/her identity: \_\_\_\_\_

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

**SECTION B – TO BE COMPLETED BY A REGISTERED AUTHORISED SIGNATORY**

Please state applicant's precise office or work-base location: \_\_\_\_\_

Is the applicant - Permanent:  Seasonal:  Contracted:   
(Please choose one option only)

Please provide: Start Date: \_\_\_/\_\_\_/\_\_\_ (dd/mm/yyyy)  
Finish Date: \_\_\_/\_\_\_/\_\_\_ (dd/mm/yyyy) (not required for Permanent applicants)

**PLEASE INDICATE REQUIRED ACCESS PERMIT LEVEL – CHOOSE ONE ONLY**

Red – Airfield	<input type="checkbox"/>	Green – Terminal Airside & Pier Buildings	<input type="checkbox"/>
Blue – All Ramp Areas	<input type="checkbox"/>	Grey – Landside only	<input type="checkbox"/>
Blue – Ramp Hangars 2-6 only (Non Security Restricted Area)	<input type="checkbox"/>		

**Note:** Applicants are only granted access which is required to carry out duties in relation to their essential work requirements.

1. What work will the applicant carry out at Dublin Airport? \_\_\_\_\_
2. Will the applicant be carrying out any Ground Handling activities? Yes \_\_\_\_\_ No \_\_\_\_\_  
(Please review Ground Handling Information Sheet)

**DOES THE APPLICANT REQUIRE PERMISSION TO DRIVE VEHICLES UNESCORTED AIRSIDE AT DUBLIN AIRPORT?**

Yes:  No:

If Yes, please specify driving area required?

Airfield:  Ramp:  Perimeter Road:

**WILL THE APPLICANT BE REQUIRED TO DRIVE JETWAYS?**

Yes:  No:

**Note:** The applicant must complete the appropriate driving training course.

**Driving Licence Information**

(Only to be completed by applicant's requesting permission to drive airside unescorted at Dublin Airport.)

Name of Country issuing Driving Licence: _____	
Licence Number: _____	Expiry Date: ___/___/___ (dd/mm/yyyy)
Categories of Vehicle for which licence is valid (B, C1, etc.) _____	
<b><u>A FULL DRIVING LICENCE IS REQUIRED TO DRIVE AIRSIDE</u></b>	

# DECLARATION BY AUTHORISED SIGNATORY

## Return Of Access Permits:

I undertake to return this applicant's Access Permit to the AIC when it expires or when the applicant either ceases to be employed by us or ceases to have cause to enter any restricted area(s). I also accept that my company will be liable to pay for any unreturned permits.

## Aviation Security Training:

I confirm that the mandatory Module 1 Basic Security Awareness Training Programme has been successfully completed by the applicant.

## Airside Training:

I confirm that where this applicant's duties require Airside (Ramp) access and Airside (Ramp) Driving authorisation that DAA approved appropriate Airside Training instruction and ramp familiarisation has been or will be provided before he/she commences unescorted Airside (Ramp) duties.

The National Civil Aviation Security Programme requires that all staff requesting access to security restricted areas are subject to a minimum 5 year background check (applicant's identity and previous experience). Please confirm that your company has conducted this background check and that the results confirm, as far as can be reasonably ascertained that the applicant is a suitable person to be issued with an unescorted Airport Access Permit.

Yes: \_\_\_\_\_ No: \_\_\_\_\_ Signed: \_\_\_\_\_ (Authorised Signatory)

Date: \_\_\_\_\_ Name in Block Capitals: \_\_\_\_\_

Access Permit Ref No: \_\_\_\_\_

Completed forms may be returned to:

Access & Identification Centre (AIC)  
Airport Police Station  
Arrivals Road  
Dublin Airport

AIC use only – date received:

AIC use only – date processed: