

Transfer of Aviation Security Identification Card (ASIC) Application Form

ASIC HOLDER'S NA	AME		
Title (Optional)			
Surname			
Given Name(s)			
ASIC Number			
Current Residentia	al Address:-		
Unit Number	Street No	Street Name:	
Suburb		State	Postcode:
Resident from Date	Day	Month	Year
Current Postal Add	dress (if different fr	om above)	
Unit Number	Street No	Street Name:	
Suburb		State	Postcode:
RECEIPT (to be o	completed on colle	cting ASIC holder)	
1,			acknowledge receipt of Aviation
Security Identification Card No		which remai	ns the property of Alice Springs Airport
and is on loan to me only	y whilst I am employe	ed in my current capacity. I ad	cknowledge and accept the conditions.
Signature:			

TO BE COMPLETED BY APPLICANTS EMPLOYER

EMPLOYER DETAIL	_S			
Employer Name				
Organisation Name				
Organisation Type				
EMPLOYER CONTACT I	PERSON			
Title				
Surname				
Given Names				
EMPLOYER ADDRESS				
Unit Number	Street No	Street Nam	ne:	
Suburb			State	Postcode:
Country				
EMPLOYER CONTACT I	DETAILS			
Phone Numbers	□ Work ()		
	☐ Mobile			
Email Address				
SECURITY ACCESS	REQUIREMENTS	S		
Applicant's Position				
Applicant's Title				
Applicant's Department				
Type of Pass			I AUS (see remarks below) I ASP	
Area for which access is required			Security Restricted Area General Aviation Area	
			Sterile Area (Concessionaire	es)
Frequencies of access.			Daily	
			□ Weekly □ Monthly	
Reason for access:-				

All applications for an AUS card must be accompanied by a <u>separate letter</u> from the applicant's employer stating the name of all ports for which access is required, the frequency of access and the purpose of access.

TO BE COMPLETED BY APPLICANTS EMPLOYER (cont'd)

Authorised person must be registered with and approved by Alice Springs Airport

I (Name)	
correct and request that an ASIC be issued for the a Airport of any changes to the above particulars, and employment or upon transfer of the applicant to a po Certification I confirm that I have authority to do so	(applicant's full name) details are areas as indicated on page 2. I undertake to notify Alice Springs to recover and return the ASIC prior to the applicant leaving our osition which does not require an ASIC. By signing this Employer to on behalf of the Company. Under my authority, the Company on together with any penalties payable either to the application or
	ment has not been made in accordance with the terms of same, ASICs to the Company. Alice Springs Airport also reserves the owing failure to honour the credit agreement.
Alice Springs Airport is not liable for any loss or da ASICs as a result of a failure to honour the credit agr	mage sustained by the Company as a result of any non issue of reement.
Signature of Applicant	Date
OFFICE USE ONLY	
Date:	
Receipt Number:	
Amount*:	
Previous Card Returned:	Yes / No
Updated information of Database	Yes / No
Initials	
*Transfer of ASIC \$135.00 inc GST per AS	ıc

Alice Springs Airport