

Portland International Jetport – Security Badge Application

This application is for unescorted access in the SIDA/Secure/Sterile areas at the Portland International Jetport. The Airport Operator is required to verify your identity and work authorization from the List of Acceptable Documents (Form I-9). Either one document from List A or one document from List B and List C are required. The documents CANNOT be from the same list.

*******U.S. Citizens born abroad must show proof of citizenship via Form FS-545 or U.S. Passport*******

LISTS OF ACCEPTABLE DOCUMENTS

All documents containing an expiration date must be unexpired.

* Documents extended by the issuing authority are considered unexpired.

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

Examples of many of these documents appear in the Handbook for Employers (M-274).

Codes

Race

White/Latino.....W
Black.....B
Asian.....A
Native American.....I
UnknownU

Eye Color

Black.....BLK
Blue.....BLU
Brown.....BRO
Green.....GRN
Gray.....GRY
Hazel.....HAZ
Maroon.....MAR
Multicolored.....MUL
Pink.....PNK
Unknown.....UNK

Hair Color

Bald.....BAL
Black.....BLK
Blonde.....BLN
Blue.....BLU
Brown.....BRO
Green.....GRN
Gray.....GRY
Orange.....ONG
Purple.....PLE
Pink.....PNK
Red/Auburn.....RED
Sandy.....SDY
Unknown.....XXX
White.....WHI

Revision 02/05/2024

LIST A Documents that Establish Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity	AND	LIST C Documents that Establish Employment Authorization
1. U.S. Passport or U.S. Passport Card		1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, sex, height, eye color, and address		1. A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, sex, height, eye color, and address		2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)
3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa		3. School ID card with a photograph		3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
4. Employment Authorization Document that contains a photograph (Form I-766)		4. Voter's registration card		4. Native American tribal document
5. For an individual temporarily authorized to work for a specific employer because of his or her status or parole: a. Foreign passport; and b. Form I-94 or Form I-94A that has the following: (1) The same name as the passport; and (2) An endorsement of the individual's status or parole as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.		5. U.S. Military card or draft record		5. U.S. Citizen ID Card (Form I-197)
		6. Military dependent's ID card		6. Identification Card for Use of Resident Citizen in the United States (Form I-179)
		7. U.S. Coast Guard Merchant Mariner Card		7. Employment authorization document issued by the Department of Homeland Security For examples, see Section 7 and Section 13 of the M-274 on uscis.gov/i-9-central .
		8. Native American tribal document		The Form I-766, Employment Authorization Document, is a List A, Item Number 4 , document, not a List C document.
		9. Driver's license issued by a Canadian government authority		
		For persons under age 18 who are unable to present a document listed above:		
		10. School record or report card		
		11. Clinic, doctor, or hospital record		
		12. Day-care or nursery school record		
6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI				

Section I

Application Information (Please PRINT)

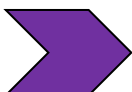
Last Name		First Name		Full Middle Name	
List any Alias, Maiden, Nicknames			Social Security #		Date of Birth
Resident Street Address		City		State	Zip Code
Phone Number		Email Address			
Country of Citizenship		State/Country of Birth		Sex(M/F)	Race (use code)
Height (ft. and inches)		Weight (pounds)		Eye Color (use code)	Hair color (use code)
Signature Authority's Company Name		Street Address		City	State Zip
Emergency Contact Name		Relationship to Applicant		Emergency Contact Phone	
For Applicants who will need airfield driving authorization				List any other companies for whom you hold a PWM badge	
Driver's License Number		State of Issuance		Expiration Date	
Have you ever held a PWM issued SIDA badge and/or submitted a badge application previous to this one? (Please circle) YES or NO					

If you have any of the following documentation, you are required to disclose it.
If you do not have any of the following documentation, please skip this section.

US Passport or US Passport Card number	Expiration
Alien Registration Number	Expiration
Permanent Resident Card Number	Expiration
Non-Immigrant Visa Number	Expiration
Foreign Passport Number	Expiration
Certificate of Birth Abroad (DS-1350)	
I-94 Arrival/Departure Document Number	

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JetportOpsCenter@portlandmaine.gov Effective Date: 8/2/2025

Name: _____ Company _____ Last 4 SSN _____



Privacy Act Notice

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, 44939, and 46105; the Implementing Recommendations of the 9/11 Commission Act of 2007, § 1520 (121 Stat. 444, Public Law 110-53, August 3, 2007); FAA Reauthorization Act of 2018, §1934(c) (132 Stat. 3186, Public Law 115-254, Oct 5, 2018), and Executive Order 9397 (November 22, 1943), as amended.

Purpose: The Department of Homeland Security (DHS) will use the biographic 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). 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 the information.

Routine Uses: In addition to those disclosures generally permitted under 5 U.S.C. 522a(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 applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses.

Disclosure: Pursuant to § 1934(c) of the FAA Reauthorization Act of 2018, TSA is required to collect your SSN on applications for Secure Identification Display Area (SIDA) credentials. For SIDA applications, failure to provide this information may result in denial of a credential. For other aviation credentials, although furnishing your SSN is voluntary, if you do not provide the information requested, DHS may be unable to complete your security threat assessment.

I have read and understand the Privacy Act Statement.

Printed Name

DATE

Signature

Fee Schedule: All checks should be made payable to **The City of Portland.**

Initial Badge Fee: \$75.00

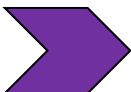
Lost Badge Fees:

1st replacement: \$100

2nd replacement: \$150

3rd replacement: \$200

Replacement badges will be issued upon receipt of lost badge fee **as well as** written notice by badge-holder's Signature Authority (or designee). Replacement badges will be issued at the discretion of the Airport Security Coordinator. *If the lost badge is returned within 30 days, a refund check of \$75 will be mailed to the badge holder's address of record.*



Disqualifying Criminal Offenses

Individuals seeking unescorted access authority in the SIDA, Secure, or Sterile area and/or performing screening are required to undergo a fingerprint based criminal history records check (CHRC). There are 28 disqualifying crimes under the Transportation Security Administration (Part 1542.209) that will disqualify you from receiving a PWM security badge. Those crimes are:

- | | |
|---|--|
| 1) Forgery of certifications, false marking of aircraft, and other aircraft registration violations | 20) Unlawful possession, use, sale, distribution, or manufacture of an explosive or weapon |
| 2) Interference with air navigation | 21) Extortion |
| 3) Improper transportation of hazardous materials | 22) Armed or felony unarmed robbery |
| 4) Aircraft piracy | 23) Distribution of, or intent to distribute, a controlled substance |
| 5) Interference with flight crew members or flight attendants | 24) Felony arson |
| 6) Commission of certain crimes aboard an aircraft | 25) Felony involving a threat |
| 7) Carrying a weapon or explosive aboard an aircraft | 26) Felony involving: |
| 8) Conveying false information and threats | a) Willful destruction of property |
| 9) Aircraft piracy outside the special aircraft jurisdiction of the United States | b) Importation or manufacture of a controlled substance |
| 10) Lighting violations involving transporting controlled substances | c) Burglary |
| 11) Unlawful entry into an aircraft or airport area that serves air carriers | d) Theft |
| 12) Destruction of an aircraft or aircraft facility | e) Dishonesty, fraud, or misrepresentation |
| 13) Murder | f) Possession or distribution of stolen property |
| 14) Assault with intent to murder | g) Aggravated assault |
| 15) Espionage | h) Bribery |
| 16) Sedition | i) Illegal possession of a controlled substance punishable by a maximum term of imprisonment of more than 1 year |
| 17) Kidnapping or hostage taking | 27) Violence at international airports |
| 18) Treason | 28) Conspiracy or attempt to commit any of the criminal acts listed in this paragraph |
| 19) Rape or aggravated sexual abuse | |

By signing, I certify that: I DO NOT have a disqualifying criminal offense and I do consent to a fingerprint Criminal History Records Check (CHRC); in accordance with 49 CFR 1542.209. I understand my obligation to disclose to the airport operator within 24 hours if convicted of any disqualifying criminal offense that occurs while I have unescorted 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 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).

Printed Name _____

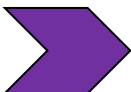
Signature _____ Date _____

* The airport operator reserves the right to approve or deny a SIDA badge based upon the results of the Criminal History Records Check results. Further, the airport operator reserves the right to deny a SIDA badge if its Airport Security Coordinator believes it is in the best interest of the airport's security program.

* The applicant is entitled to receive a copy of the Criminal History Record Check by submitting a written request to the Airport Security Coordinator.

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Section II

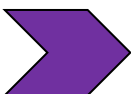
APPLICANT CERTIFICATION (Please Initial)

I hereby submit to the Portland International Jetport (hereinto known as the airport operator) this application for a Security ID badge and agree to the following:

- ____1. I agree to comply at all times with the security rules and policies of the airport operator, including the provisions of Chapter 25 and the Transportation Security Administration (TSA), an agency of the United States, including the provisions of Title 49, CFR Parts 1540, 1542, and 1544.
- ____2. My Security ID badge remains the property of the Portland International Jetport (PWM), and is issued for use as long as I have an operational need for unescorted access, and is not transferable to any other individual. PWM has the right to revoke the authorization of my ID badge where such action is determined to be in the best interest of airport security.
- ____3. I will visibly display my PWM Security ID badge on my outermost garment, above the waist and below the neck at all times when inside the SIDA, Secured, or Sterile areas of the airport.
- ____4. I must challenge individuals who are not displaying airport approved identification and immediately notify the Jetport Operations Center (207-756-8310) of any individual with an invalid ID, or who cannot produce a valid airport issued or airport approved ID. (1542.211 (d))
- ____5. In the event of any change in my PWM Security ID Badge status, I will obtain a new PWM Security ID badge and/or return my current badge directly to the Operations Center.
- ____6. I will neither aid nor participate in "piggy-backing" (allowing unauthorized access to secured, sterile or restricted areas) nor will I otherwise breach, disobey, or disregard any security directive, plan, or program at the airport. Failure to comply with PWM Security Rules shall result in badge suspension and possible revocation (refer to item #12).
- ____7. Access to gates and doors will be monitored by surveillance cameras and the airport access control system. I will follow "STOP AND WAIT" procedures at all doors and gates to ensure they are securely closed before leaving the area.
- ____8. I will immediately notify my Authorized Signatory who will then inform the Airport Security Coordinator if I am arrested of any crimes listed under Title 49, CRF, Parts 1542.209 and 1544.229.
- ____9. I will immediately notify my Authorized Signatory and the Jetport Operations Center if my PWM Security ID Badge is lost or stolen. I understand that I am able to receive a replacement badge, at the discretion of the Airport Security Coordinator, when I pay the fee and turn in a letter from my Authorized Signatory to the Jetport Operations Center.
- ____10. I will not tamper, interfere with, compromise, modify, attempt to circumvent, or cause a person to tamper or interfere with, compromise, modify, or attempt to circumvent any security system measure, or procedure implemented.
- ____11. I understand that all persons in the SIDA are prohibited from carrying a firearm unless that person is a Law Enforcement Officer required to carry a firearm while performing Law Enforcement duties at the airport.
- ____12. I understand that my PWM Security ID Badge only allows unescorted access to the SIDA, Sterile, or Secured area with an operational need. Operational need, for this purpose, is defined as an individual having a legitimate, business related need to access a security area. Individuals should be on company time and carrying out those job duties as defined by their job description and/or at the discretion of their management. Individuals accessing the SIDA, Sterile, or Secured area without an operational need or while off duty are subject to security violation penalties.
- ____13. I understand that my PWM Security ID Badge does not permit escorting unless the escort credential is present. If the escort credential is present it only allows the escort of those individuals who are NOT badged and have an operational need (defined by the airport operator in #12). All equipment, tools, materials, etc. being taken into the SIDA, Sterile, or Secured area by an individual under escort are also the responsibility of the escorting badge holder. The airport operator may deny escort eligibility for any reason they determine to be in the best interest of airport security. Escorts are limited to the number of escorts listed on their badge.
- ____14. I understand that failure to comply with airport security rules will result in a Notice of Violation. Moreover, the penalties for security violations may include badge suspensions, retraining, disciplinary meetings, and/or badge termination. All badge suspensions and penalties are at the discretion of the Airport Security Coordinator. All badge suspensions and penalties are at the discretion of the Airport Security Coordinator. **CENTRALIZED DATABASE NOTICE:** Individuals who violate aviation security requirements resulting in ID media revocation, will be added to the CRD for a period of five years.

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____15. **AVIATION WORKER SCREENING NOTICE:** Aviation workers are subject to screening for unauthorized weapons, explosives, and incendiaries. Non-Compliance with the Jetport's aviation worker screening policy could result in penalties, which may include confiscation of the airport operator-issued ID media and/or revocation of unescorted access authority. **SCREENING NOTICE:** Any employee holding a credential granting access to a SIDA Area or Sterile Area, or individual under escort, may be screened at any time while gaining access to, working in, or leaving a SIDA or Sterile Area.

____16. **LATE RENEWAL NOTICE:** Badge holders are expected to renew their badges before the expiration date. Any renewals after the badge has expired will require a \$40 Late Badge Renewal Fee before the new badge will be issued. Badge renewals over 45 days late will require a new application.

____17. I understand that I must notify the Airport Operations Center when my home address changes. My current home address must be on file with the Airport Operations Center at all times that I possess an Airport Security ID badge.

I understand and agree to comply with the terms and conditions provided for in this application and agree to comply with any changes or amendments to the terms and conditions that may be imposed by the airport operator and TSA.

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).

Print Name _____

Signature _____ Date _____

Social Security Authorization Statement

I authorize the Social Security Administration to release my Social Security Number and full name to the Transportation Security Administration, Enrollment Services and Vetting Programs, Attention: Vetting Programs (TSA-10)/ Aviation Workers 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 my Social Security number 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 _____ Date of Birth _____

SSN and Full Name _____

Parental Consent

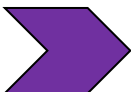
If under 18 years of age, a parent / guardian must consent to the Department of Homeland Security's, Transportation Security Administration, and Security Threat Assessment.

Parent / Guardian Printed Name: _____ Date _____

Parent / Guardian Signature: _____

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Section III (AUTHORIZED SIGNATORY)

*** **THIS SECTION IS TO BE COMPLETED BY THE AUTHORIZED SIGNATORY*****

Signature Authority Information:

Authorized Signatory Name		Title	
Company			
Address		City	State Zip Code
Office Number		Email Address	

Access Media Required (Select Below):

☐ Secured All Access Badge ☐ SIDA Only (North Apron, Cargo Apron, or South Apron) ☐ Sterile Area Only Badge

Endorsements (Select All that Apply):

☐ Jetway Door Shunt (45 Min) ☐ Intellikey (attach letter with itemized door access request)
☐ Sterile Badge Only - Jetway Access ☐ Escort Privilege (3 Escort Maximum) ☐ Escort Privilege (6 Escort Maximum)
☐ Escort Privilege (Unlimited Escorts/Requires ASC Approval) – ASC Approval _____

Badge-Holder Status (Select Below)

☐ Full Time/Permanent ☐ Temporary/Seasonal - Anticipated Employment End Date _____

Verification of Applicant Documents

List A: _____	OR	List B: _____	AND	List C: _____
For those applicants born abroad, please indicate proof of citizenship document: _____				

By my signature I certify: that I am an authorized representative of the above named company and as such may sign this application; that the foregoing information is true, accurate and all information is verified; that the above named company has authorized a computer based fingerprint submission or has provided the Portland International Jetport written verification of proof that the company has subjected the applicant to a criminal history record check; is responsible for all application fees and charges; and that the applicant's airport-issued identification media will be returned upon request, termination, or when access is no longer required; that the applicant is required to have access to the above-mentioned areas of the airport; and that I have completed the TSA mandated Signatory Training for my company. ***I understand that failure to turn in this applicant's badge and key (if issued) will result in a \$150 charge to the company.*** 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)

Authorized Signature _____ Date _____

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