FORM NAME:	*Authority to Drive Airside Application Form*
PURPOSE:	*To be completed by Stakeholders as part of application.*
SCOPE:	*This form applies to Toll Government and Defence Airports.*

AIRPORT:	

PERSONAL DETAILS			
Name			
Company		**Position**	
Contact Number		**Email Address**	
ASIC Number		**ASIC Expiry Date**	
OPERATIONAL NEED *Please outline your operational requirement for an Airside Driving Authority (including areas of operation.)*			

QUALIFICATIONS *(Please attach copies of all relevant licences)*					
Licence Type	eg Drivers Licence			**Class**	
Licence Number		**Issuing State**		**Expiry**	
Equipment Specific Licence Details *(eg.Forklift)*					
Licence Type		**Licence Number**		**Expiry**	

Please fill out below details			
Home address		**Date of Birth**	

APPLICANT SIGNATURE			
Signature		**Date**	

TURN PAGE OVER TO COMPLETE ASSESSMENT

QUESTIONS	ANSWERS	
1. Generally, a restricted ADA limits you to what areas of the airport? (Circle the areas)	**RUNWAY APRON TAXIWAY RUNWAY STRIP**	
2. When should you notify the Airport operator of an accident?		
3. Should you secure all vehicle gates after passing through?	**YES / NO** (Circle)	
4. Is an ASIC or VIC card required if you are not getting out of the vehicle?	**YES / NO** (Circle)	
5. Does your vehicle require an Airside Vehicle Permit?	**YES / NO** (Circle)	
6. What is the speed limit within 15m of any aircraft?		
7. What is the speed limit on clear apron areas?		
8. When should you give way to passengers?		
9. What does this marker indicate? 		
10. What is this and on what side do you stop? 		

OFFICE USE ONLY			
Drivers Licence Copies Attached?	Yes / No	*Assessment Result*	Pass / Fail
Details Entered in the Register?	Yes / No	*Additional Requirements Attached?*	Yes / No
Assessed By? [name]			
Authorisation By? [name]			
Authorisation By? [Sign]		*Date:*	