



# Marana Regional Airport—Gate Access Control Card Application

Card Key# \_\_\_\_\_

<input type="checkbox"/> New (\$15) <input type="checkbox"/> Replacement/Lost (\$25) <input type="checkbox"/> Main Gate <input type="checkbox"/> West Gate <input type="checkbox"/> North Gate <input type="checkbox"/> FBO Start Date ____/____/____ Expires 2 years after Start Date	<i>Office Use Only</i> Issued By _____ Date ____/____/____ Signature _____ Amount Due _____
--	---

## Section 1—Applicant’s Information (please print legibly or application may be rejected)

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

Driver’s License Number \_\_\_\_\_ State \_\_\_\_\_ Expiration \_\_\_\_/\_\_\_\_/\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Make of Vehicle 1 \_\_\_\_\_ Model of Vehicle 1 \_\_\_\_\_ License \_\_\_\_\_ State \_\_\_\_\_

Make of Vehicle 2 \_\_\_\_\_ Model of Vehicle 2 \_\_\_\_\_ License \_\_\_\_\_ State \_\_\_\_\_

Pilot and/or Aircraft Owner:     Pilot     Aircraft Owner     Both    # of Months Per Year At AVQ \_\_\_\_\_

Aircraft 1 Type \_\_\_\_\_ Aircraft 1 Model \_\_\_\_\_ Tail # \_\_\_\_\_ Hangar # \_\_\_\_\_ Tie Down # \_\_\_\_\_

Aircraft 2 Type \_\_\_\_\_ Aircraft 2 Model \_\_\_\_\_ Tail # \_\_\_\_\_ Hangar # \_\_\_\_\_ Tie Down # \_\_\_\_\_

Business Owner, Employee, or Contractor:     Business Owner     Employee     Contractor     Other \_\_\_\_\_

Business Name \_\_\_\_\_ Business Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Applicant’s E-mail Address \_\_\_\_\_ Name of Supervisor \_\_\_\_\_

## Section 2—Airport Security and Access Responsibility Agreement

1. I will not allow anyone else to use my Gate Access Control Card(s).
2. I will stop and wait for the gate to fully close (entering and exiting) prior to leaving the gate area.
3. I will not stop on the gate tracks. I understand the Town of Marana is not responsible for vehicle damage.
4. I will not allow anyone who is not under my escort (non-badge holder only) to follow me through any access gate.
5. I will closely monitor the activity of anyone I escort onto the airside.
6. I will report the loss of my Gate Access Control Card immediately to the airport administrative office or call 520-382-8052.
7. I understand that there is a \$25 fee to replace a lost, stolen, or damaged Gate Access Control Card.
8. I agree that the Gate Access Control Card is the property of Marana Regional Airport and that it shall be returned upon request or when airside access is no longer required.
9. If the gate shall malfunction, I will immediately notify airport operations at (520) 382-8053.
10. I understand that if my rent, hangar fees, or tie down fees are not up to date, my gate access may be deactivated.
11. I understand that gate access will not be granted if I do not have my Gate Access Control Card in my possession.
12. I will abide by all laws, all airport rules and regulations as set forth in Marana Town Code Title 15 “Marana Regional Airport”, and airport signage, including, but not limited to, the 15 miles-per-hour ramp speed limit, the prohibition of using airport perimeter roads and/or driving on or across runways and taxiways without airport management permission, and the prohibition against discharging a firearm. Criminal penalties and/or fines may be imposed upon violators.

I acknowledge that pursuant to Marana Town Code 15-2-1(G) that “[b]y using the airport and its facilities, the user releases and agrees to hold harmless and indemnify the town and its officers, employees and agents from and against any liability or loss resulting from that use.” Applicant’s Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

By signing below, I certify that I have read the above Airport Security and Access Responsibility Agreement, and I understand that failure to comply with any of the provisions outlined therein may result in the suspension or revocation of my Gate Access Control Card and/or the imposition of the above-described penalties. Further, I certify that the information I have provided in this application is true, complete, and correct to the best of my knowledge and belief.

Applicant’s Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_