

Security Access Card (SAC) Application Form



1. Applicant to Complete

Applicant Name	ASIC Number			
Contact Number	ASIC Type		ADL	AUS
Email	Expiry Date		/	
Company Name			Month	Year
Department	Reason for Security Access			
Position / Occupation				
Access required (tick all that apply)	Terminal 1 - Landside	Gate J	AAL Offices	General Aviation Terminal
	Terminal 1 - Airside	Gate 2	AAL Offices - B111	AAL Offices - T1
	Ramp Bollard	Plaza Bollard		
Applicant Signature			Date	

2. Company Authorised Signatory to Complete

I _____ of _____
Authorised Signatory - Print Full Name Position Title Company Name

hereby certify that _____ requires security access to the area(s) identified above.
Applicant's Full Name

By authorising this document I confirm that the:

- Applicant requires access to the area(s) for the purpose of the holders employment only.
- The applicant/company agree to pay the required fee as detailed in the current schedule of fees available on AAL's website www.adelaideairport.com.au
- Applicant has read and understood the *Conditions of Issue and Use* set out in the AAL Security Guide.
- Applicant and the Company will abide by the *Conditions of Issue and Use* set out in the AAL Security Guide.

Failure to abide by the Conditions of Issue & Use may result in the applicant's access privileges being withdrawn, for a period to be determined by Adelaide Airport Limited.

Signature _____ Date _____

3. Office Use Only

Security Card Number		Receipt Reference No	
Issued By		Date Inductions Completed	

I hereby acknowledge receipt of the Security Access Card noted above.

Applicant Signature _____ Date _____