



# AUTHORITY TO DRIVE AIRSIDE (ADA) FORM – AD001

This form is to be used when applying for a new Authority to Drive Airside (ADA) or when renewing your current ADA due to its forthcoming expiry.

All persons who drive vehicles on the airside of Alice Springs Airport (ASA) must hold a current ADA. ADA's are only issued by ASA or an approved issuing authority. The requirements of ADA holders are set out in the ASA Airside Drivers Guide.

To be completed in **BLOCK CAPITALS** only please.

## SECTION A – APPLICANT DETAILS

To be completed by **ALL** applicants:

<input type="checkbox"/>	New ADA		
<input type="checkbox"/>	Renewal:	Existing ADA No: _____	Expiry Date: _____
Name:		_____	
		Given Name	Surname
Date of Birth:	____/____/____	Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Employed By:	_____		
Job Title:	_____		
Phone Number:	<input type="checkbox"/> Work _____		
	<input type="checkbox"/> Mobile _____		
Residential Address:	_____		
	Suburb _____	State _____	Postcode _____
Email Address:	_____		

## SECTION B – LICENCE DETAILS

Drivers Licence No: \_\_\_\_\_ Expiry Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

State/Territory Issued: \_\_\_\_\_ Class: \_\_\_\_\_

Is your Drivers Licence subject to any conditions or restrictions (eg. requirements to wear glasses)? If so please detail here:

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ASIC # \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Category of ADA being Applied for: (Please tick one)

**CAT 1**

Perimeter Roads & Approved Lease Areas

**CAT 2**

Roads & Aprons

**CAT 4**

Roads, Aprons, Taxiways & Runways

Reason applying for ADA:

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A copy of your **Driver's Licence** and **ASIC** must be attached to this application form. Once received an online Authority to Drive Airside (ADA) Induction will be sent to you.

## SECTION C - TRAINING

Initial applicants must attach a completed Drivers Log to this application form showing that they have successfully carried out the minimum required hours of training for the category of licence they are applying for. Driving Airside whilst training must be under supervision of an experienced ADA holder, equivalent to or higher than the category of licence being applied for.

- **Category 1:** Familiarisation of area
- **Category 2:** Four hours
- **Category 4:** Eight hours

**Note (a):** Category 4 ADA will only be issued to applicants who have a requirement to enter taxiways and/or runways in radio equipped vehicles and hold an Aircraft Radiotelephone Operator Certificate of Proficiency.

**Note (b):** The applicant may be required to sit other Online Inductions if not already completed.

## SECTION D - PAYMENT

Payment for ADA applications must be made at the time of submission, no applications will be accepted without payment.

**ADA cost: \$50 (Inc. GST)**

ASA accepts the following methods of payment:

- Cash
- Credit
- EFTPOS
- Cheques made payable to Alice Springs Airport

## SECTION E – APPLICANT CERTIFICATION

I, \_\_\_\_\_ hereby:  
Print Name

- (i) Certify that the information provided on this form is correct and agree to notify the ASA management Centre of any changes to the above ;
- (ii) Confirm that I have read and understood the Airside Drivers Guide for Alice Springs Airport;
- (iii) I have approved the Category of ADA that the applicant is applying for based on operational requirement;
- (iv) The applicant will only drive/operate equipment Airside on which he/she holds current endorsement and has completed appropriate company training and inductions; including requirements in relations to an airside vehicle/equipment incident;
- (v) I understand that I am responsible for ensuring that ASA are notified immediately in writing if the applicant loses or has his/her State or Territory Drivers Licence suspended or cancelled for any reason.
- (vi) Understand that failure to comply with the rules for driving airside or the Regulations may result in the suspension or cancellation of my ADA.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature Day Month Year

## SECTION F – EMPLOYER CERTIFICATION

To be completed by company authorised signatory only:

I, \_\_\_\_\_  
Print Name

of: \_\_\_\_\_  
Company

Hereby certify that:

- (i) The applicant as detailed in Section A of his form has undertaken the mandatory applicable training
- (ii) I have approved the Category of ADA that the applicant is applying for based on operational requirement;
- (iii) The applicant will only drive/operate equipment Airside on the which he/she hold current endorsement and has completed appropriate company training and inductions; including requirements in relations to an airside vehicle/equipment incident;
- (iv) I understand that I am responsible for ensuring that ASA are notified immediately in writing if the applicant losses or have his/her State or Territory Drivers Licence suspended or cancelled for any reason.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature Day Month Year

## CHECKLIST

Please ensure you have attached the following documents to your completed application:

- ASIC Photocopy
- Driver's Licence Photocopy
- Drivers Log showing applicable mandatory hours of training (initial applicant only)
- Drivers Familiarisation sign off (CAT 1 Only)
- Aircraft Radiotelephone Operator Certificate of Proficiency (CAT 4 applicant only)

**OFFICE USE ONLY**

<b>ATTACHMENTS</b> <input type="checkbox"/> ASIC <input type="checkbox"/> Drivers Licence <input type="checkbox"/> Driver's Training Log (initial applicant only) <input type="checkbox"/> Drivers Familiarisation (Cat 1) <input type="checkbox"/> AROCP (Cat 4)	<b>PAYMENT</b> Method: CC / CASH / CHEQUE / ACCOUNT Receipt#: _____ Date: ____/____/____ Initial: _____
<b>PROCESSING</b> Previous ADA returned: ____/____/____ Initial: _____ Induction: ____/____/____ Initial: _____ Issued: ____/____/____ Initial: _____	<b>NOTES</b>

**RECEIPT – TO BE COMPLETED ON ISSUE OF ADA**

I, \_\_\_\_\_ acknowledge receipt of:  
Print Name

Authority to Drive Airside (ADA) Card \_\_\_\_\_  
(ADA Number)

Which remains the property of Alice Springs Airport and is to be returned to Alice Springs Airport when there is no longer an operational need to have the ADA or upon expiry.

Signed: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Signature Day Month Year