Authority to Drive Airside (ADA) Application

Category 1 – Apron Area ☐	Category 2 – Movement Area ☐
Applicant Details	
First Name:	Surname:
Street Address:	
Suburb:	State: / Postcode:
E-mail:	Mobile:
Employer / School (If Applicable):	
Billing Details (If different from above)	
First Name:	Surname:
Street Address:	
Suburb:	State: / Postcode:
E-mail:	Mobile:
Driver's Licence Details	
Licence Number:	
Class:	Expiry:
I have read the Airside Vehicle Control Handbook and agree to fulfil the requirements on Airside Drivers set out in the Handbook and I acknowledge that the Airport Operator may cancel or suspend the Authority at any time.	
Signature:	Date:

OFFICE USE ONLY	
ADA Card Number:	Category 2 Drivers ONLY: Copy of Aeronautical Radio Operator Certificate (AROC) attached: *Yes / No*
ASIC & ADA Card Expiry Date:	
Copy of ASIC attached: Yes / No	*Test Result: Pass / Fail*
Copy of Drivers Licence attached: Yes / No	