

1. DETAILS

| | |
|----------------|---------|
| COMPANY NAME | |
| CONTACT NAME | |
| PHONE | MOBILE |
| POSTAL ADDRESS | |
| EMAIL ADDRESS | ADA NO. |

2. VEHICLE DETAILS

| | |
|---|------|
| MAKE/MODEL | YEAR |
| REGISTRATION NUMBER | |
| GROSS VEHICLE MASS | |
| The charge is \$110 (including GST) per vehicle up to 2 tonne or \$110 + \$70 (including GST) per tonne/pro rata for vehicles over 2 tonnes is payable at the time of lodging this application. | |

3. INSURANCE

A copy of Insurance policies must be attached

i. PERSONAL INJURY- THIRD PARTY

| | |
|-----------------------|-----------------------|
| Registered Vehicle | Unregistered Vehicles |
| (CTP Insurer) | (Hangerkeepers) |
| Expiry Date of Policy | |

ii. PROPERTY DAMAGE- COMPREHENSIVE

| | |
|-----------------------|-----------------------------|
| Insurer | Amount of Cover (\$20M min) |
| Expiry Date of Policy | |

OFFICE USE ONLY

| | |
|--|--------------------------|
| Indemnity and release executed and lodged with BAL | <input type="checkbox"/> |
| Copy of Insurance policies lodged with application | <input type="checkbox"/> |
| Vehicle check- Registration on vehicle / pink slip for unregistered vehicles | <input type="checkbox"/> |
| Payment Made | <input type="checkbox"/> |

| <i>AUA No</i> | <i>Expiry Date</i> | <i>Paid (Y/N)</i> | <i>Amount Paid</i> | <i>Issued</i> |
|-------------------------------------|--------------------|-------------------|--------------------|---------------|
| | | | | |
| <i>AUA Issue Approved By</i> | | | | |
| <i>Name</i> | | <i>Signed</i> | | |

1. Explain the need for frequent unescorted access and the type of work to be undertaken airside.

2. State the airside area in which you intend to operate your vehicle.

3. RELEASE AND INDEMNIFICATION

- In consideration of being granted an Authority to Use Airside (AUA) in accordance with this application, the Applicant agrees to release and indemnify Bankstown Airport Limited (BAL), its officers and employees and any persons providing assistance to BAL/CAL in relation to all claims for damage to the Vehicle in moving the vehicle should it become immobilised on the Movement Area.
- I, the Applicant, have personally read the 'Airside Vehicle Control Handbook' and agree to fulfil all the requirements for vehicle operators as set out in this booklet.
- I, the Applicant, as the Vehicle Operator, undertake to ensure that the vehicle is operated in accordance with the 'Airside Vehicle Control Handbook'.
- I, the applicant, confirm that this vehicle is fitted with an amber rotating or flashing beacon with 360° visibility.
- I confirm that if the vehicle is used for business purposes, the vehicle will display company logos.

Applicant's Name

Applicant's Signature

| Payment Method | | | |
|---|--|---------------|--|
| Cash <input type="checkbox"/> | Cheque <input type="checkbox"/> | Cheque No: | On Account <input type="checkbox"/> |
| Credit Card <input type="checkbox"/> | | Name on Card: | |
| Number: | | Exp Date: | CCV No: |
| Signature: | | | |

Please note: AUA will not be issued without payment.

How to lodge your application:

Send your completed application form and payment and to:

Email: info@bankstownairport.com.au

Fax: (02) 9791 0230

Post: PO Box 6450, WETHERILL PARK NSW 1851