



Application form for: Port Security Access

2016

Port Facility Unit

TEMPORARY

FIRST APPLICATION

RENOVATION:

BADGE no. _____

IF RENOVATION, MUST SUBMIT OLD BADGE **COMPANY DATA** / **CONTRACTORS**

PERSONAL DATA	Name company:	
Last name:	Chamber of commerce:	Yes <input type="checkbox"/> No <input type="checkbox"/> <i>if yes, dossier nr.</i>
First name:	Address:	
Job title	Tel:	
Address:	Fax:	
Phone:	E-mail address:	

IF YOU ARE A CONTRACTOR FOR APA, PLEASE FILL IN THE FOLLOWING

ID Number	Contact person Aruba Ports Authority N.V.:	
Nationality	Contact person contractor:	
Gender: M <input type="checkbox"/> F <input type="checkbox"/>	Working from20.....till.....20.....	

FILL IN IF YOU ARE A TRAINEE FOR ABOVE COMPANY OR CONTRACTOR

Fill in if you are applying for a vehicle pass	School / University:	
Taxi <input type="checkbox"/>	Address:	
Tour bus <input type="checkbox"/>	Tel:	Contact person Aruba Ports Authority N.V.:
Personal vehicle <input type="checkbox"/>	Fax:	
Industrial/Other <input type="checkbox"/>	Training period from20.....till.....20.....	

Vehicle access: Blue (Cargo area Barcadera/Oranjestad) Yellow (Cruise area) Red (All areas)

NOTE: **PORT ACCESS FEES**

If applying for a car decal, attach copy of valid driving license, valid insurance and a valid technical inspection documents.

ID BADGE AWG. 40,- **TAXI** AWG 75
CAR DECAL AWG. 210,- **Online Banking #.**

			BADGE "RED" ALL AREAS AND ADDITIONAL ACCESS	
Taxi area	<input type="checkbox"/>	Yellow	<input type="checkbox"/> A	Access Dock A "Alex"
Tour bus area	<input type="checkbox"/>	Yellow	<input type="checkbox"/> B	Access to Cruise Terminal-2
Access Dock "A"	<input type="checkbox"/> A	Yellow	<input type="checkbox"/> C	Access to Cruise Terminal-1
Access Cruise Terminal-2	<input type="checkbox"/> B	Yellow	<input type="checkbox"/> D	Main Security Office
Access cruise Terminal-1	<input type="checkbox"/> C	Yellow	<input type="checkbox"/> E	Access Dock E "Eva"
Access Dock "E"	<input type="checkbox"/> E	Yellow	<input type="checkbox"/> F	Access Dock F "Fritz"
Access Fock "F"	<input type="checkbox"/> F	Yellow	<input type="checkbox"/> G	Access Dock G
Access Dock "G"	<input type="checkbox"/> G	Yellow	<input type="checkbox"/> H	Cargo area Dock H "Hans" and C/K "Container Kade"
Cargo area Dock "H" and C/K "	<input type="checkbox"/> H	Yellow	<input type="checkbox"/> I	Vessel Control Tower
Barcadera Cargo area	<input type="checkbox"/> I	Blue	<input type="checkbox"/> J	Cargo Area Barcadera
Barcadera Fruit/fish area	<input type="checkbox"/> J	Blue	<input type="checkbox"/> K	Fruit/fish Barcadera

DISQUALIFICATIONS

Anyone arrested or suspected of any offense or crime, even though eventually pardoned, granted amnesty, or otherwise released as result of any other similar legal action and/or anyone known, believed, or suspected to be a narcotics addict or trafficker, and/or anyone who has been subject of a criminal investigation with regard to violation of import/export laws, **must report this below**. Giving false, incorrect or incomplete information (half-truths) in your application constitutes ground for disqualifications. If this is discovered after the Security ID Badge has been issued, the badge will immediately be revoked.

Do any of the above situations apply to you? YES NO

If Yes, Please explain:.....

IMPORTANT

If you are applying for an ID badge, a letter of good conduct (**exclusive for access to the restricted areas of the ports of the Aruba Ports Authority NV**), a drugtest and a security assessment are required. You may also be tested for drug and alcohol while in possession of a valid Port ID badge. The Aruba Ports Authority NV has the discretionary authority to deny any person or company access to the ports Oranjestad or Barcadera. Any person who has caused or is involved in an accident on one of the port premises will be submitted to a drug and alcohol test. This person will not be permitted to leave the harbor until the drug and alcohol tests are complete.

NOTE:

NOTE: attach copies of letter of conduct, drugtest, valid ID and extract of the Chamber of Commerce. If foreigner also copy of valid work permit

By signing this document you agree with all the rules and regulations of the Aruba Ports Authority NV

FOR MORE IMPORTANT INFORMATION PLEASE TURN PAGE

Applicant's signature	Signature of Manager, Owner or authorized representative of employer
_____	_____

Date: _____ Date: _____

Bank accounts: CMB-15267105 RBC-3054942 ARUBA BANK-128710

TO BE FILLED IN BY PORT AUTHORITY OFFICIAL

Date received:.....	Certificate of good conduct
Approved: _____ NOT Approved: _____	Kenmerk nummer: _____
	Expected date: _____