

# **Cayman Islands Airports Authority**

# **Unescorted Security Permit Policy**

Under the Cayman Islands Airports Security Programme and in compliance with the National Civil Aviation Security Programme of the Cayman Islands, a permanent Unescorted Security Permit will only be issued to:

- 1. An employee of the aerodrome.
- 2. An employee of an organisation who is required to engage in activities at or within the aerodrome on a daily basis.
- 3. Cayman Islands Law Enforcement Officers.

The issuance of a **NEW** permit will only occur once **ALL** of the following requirements have been complied with:

- 1. Completed application form.
- 2. Letter from employer stating why access to the aerodrome is required.
- Criminal record certificate (CRC), no older than 30 days.
   NOTE: If applicant is a foreign national or has resided abroad in the last five years, a CRC must be provided from the country of birth and from all countries of residence for the last five years.
- 4. 5 year employment history. NOTE: Confirmation from all previous employers from the last five years must be submitted in writing. Any gaps within the employment history exceeding 31 days must be verified, where possible, in writing by an appropriate body or person.
- 5. Valid passport for identification.
- 6. Completion of Safety Management Systems Training (SMS). Training must be scheduled with <u>safety@caymanairports.com</u>
- 7. Completion of General Security Awareness Training (GSAT). Training must be scheduled with <u>gsatgroup@caymanairports.com</u>

Cayman Islands Airports Authority



The issuance of a **<u>RENEWAL</u>** permit will only occur once <u>**ALL**</u> of the following requirements have been complied with:

- 1. Completed application form. NOTE: Applications must be submitted one week in advance prior to expiration date to avoid delays.
- 2. Letter from employer stating why access to the aerodrome is required.
- 3. Criminal record certificate (CRC), no older than 30 days.
- 4. Completion of annual Safety Management Systems Training (SMS). Training must be scheduled with <u>safety@caymanairports.com</u>
- 5. Completion of annual General Security Awareness Training (GSAT). Training must be scheduled with <u>gsatgroup@caymanairports.com</u>

# <u>NOTE:</u> ANY APPLICATION THAT IS SUBMITTED AND FOUND NOT TO CONTAIN ALL OF THE REQUIRED DOCUMENTATION WILL BE REJECTED.

# **Unescorted Security Permit Fees**

New & Renewal permits valid for 1 year.

Fee: \$50 CI

Replacement for Lost, Stolen, or Damaged permits.

Fee: \$25 CI

Expired Permit (Late renewal)

Fee: \$10 CI

**NOTE:** Payment is due upon submission of application form.

9:00 a.m. – 11:30 a.m. Submission of application forms to CIAA Main Administrative Office and photos (if required).

2:00 p.m. – 4:00 p.m. Issuance of permits 48HRS from submission of documentations-CIAA Main Administrative Office.

Cayman Islands Airports Authority

P.O. Box10098, Grand Cayman KY1-1001, Cayman Islands, Tel: (345) 943-7070, Fax: (345) 943-7071 Email: <u>ciaa@caymanairports.com</u>



**Renewal Application** 

### **Cayman Islands Airports Authority**

#### **Unescorted Security Permit**

### **Application Form**

1.	Surname:	First:	Middle:		
2.	Date of Birth:/	/ Place of Birth:	Passport #:		
3.	Country Issuing:		Nationality:		
4.	Current Local Address:		(Street, 1	District, Island and House #)	
5.	Last Home Address:		(Street, I	District, Island and House #)	
6.	Telephone#:	(C)	(H)	(W)	
7.	Current Employer:		Positon Held:		
8.	How long have you resided i	n the Cayman Islands?:		(Years/Months)	
9.	How long have you worked	with your current employer?:		(Years/Months)	
10.	. Have you ever been arrested or convicted for/of an offence, either locally or internationally? YES/NO				
11.	1. If YES, please state offence, country and year of arrest/conviction:				
Disclaimer- By signing, I hereby certify that the above information is correct.					

Authorised Signatory

Signature of Applicant

Date \_\_\_\_/\_\_\_/

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2018 Revision



#### **<u>5 Year Employment History</u>**

<u>NEW applicants only</u> must provide details of each period of employment in the previous 5-years. Any gaps in employment greater than 30 days, the applicant must provide the details, including a professional referee who can provide verification.

Authorised signatories are responsible for getting written verification of each period of previous employment from previous employers or, in the case of a gap in employment, from an alternative professional source

Complete in date order (most recent first).

Tick to confirm reference type:	Date from (dd/mm/yyyy):	Date to (dd/mm/yyyy):	
Employment $\Box$ Education $\Box$			
Personal/Gap  Other			
Name of company			
<u>or</u>			
Referee name			
Position held in company:			
Reason for leaving:			
Address of company:			
Person or Department in company to contact			
<u>or</u>			
Professional referee			
Telephone no & email address:			

Cayman Islands Airports Authority



Tick to confirm reference type:	Date from (dd/mm/yyyy):	Date to (dd/mm/yyyy):
Employment $\Box$ Education $\Box$		
Personal/Gap □ Other □		
Name of company		
or Referee name		
Position held in company:		
Reason for leaving:		
Address of company:		
Person or Department in company to contact		
<u>or</u> Professional referee		
Telephone no & email address:		

Tick to confirm reference type:	Date from (dd/mm/yyyy):	Date to (dd/mm/yyyy):		
Employment $\Box$ Education $\Box$				
Personal/Gap $\Box$ Other $\Box$				
Name of company				
<u>or</u>				
Referee name				
Position held in company:				
Reason for leaving:				
Address of company:				
Address of company:				
Person or Department in company to contact				
<u>or</u>				
Professional referee				
Telephone no & email address:				

Cayman Islands Airports Authority



Tick to confirm reference type:	Date from (dd/mm/yyyy):	Date to (dd/mm/yyyy):
Employment $\Box$ Education $\Box$		
Personal/Gap □ Other □		
Name of company		
or Referee name		
Position held in company:		
Reason for leaving:		
Address of company:		
Person or Department in company to contact		
or Professional referee		
Telephone no & email address:		

Tick to confirm reference type:	Date from (dd/mm/yyyy):	Date to (dd/mm/yyyy):		
Employment $\Box$ Education $\Box$				
Personal/Gap $\Box$ Other $\Box$				
Name of company				
<u>or</u>				
Referee name				
Position held in company:				
Reason for leaving:				
Address of company:				
Address of company:				
Person or Department in company to contact				
<u>or</u>				
Professional referee				
Telephone no & email address:				

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#### **Policy relating to:**

Security Access Control Measures at Aerodromes within the Cayman Islands.

Responsibilities of the permit holder:

Each cardholder shall prevent unauthorised access by non-card holders into restricted areas.

Each cardholder shall use their personal permit to enter and exit ALL AIRSIDE and SECURITY RESTRICTED AREAS, and shall ensure that all doors are securely lock and that no person(s) have entered behind them. Piggybacking and tailgating is an offence even if done by cardholders and therefore not allowed. If observed the cardholder shall bring this breach to the attention of the nearest Airport Security Officer.

Each cardholder shall challenge any person observed in a restricted area not properly displaying their permit. If observed the cardholder shall bring this breach to the attention of the nearest Airport Security Officer.

Each cardholder shall challenge any person observed in a restricted area who although displaying a permit but is unaccompanied when required to be. If observed the cardholder shall bring this breach to the attention of the nearest Airport Security Officer.

Each cardholder shall challenge any person observed in a restricted area who although displaying a permit is in an Area or Zone in which they are not authorized to be in. If observed the cardholder shall bring this breach to the attention of the nearest Airport Security Officer.

Each cardholder when on duty in the area of the boarding gates is responsible for preventing the mixing of disembarking and embarking passengers. If observed the cardholder shall bring this breach to the attention of the nearest Airport Security Officer.

Cardholders shall ensure that disembarking flight crew do not access the Departure Lounge from the Airside. Flight crew may be allowed access to the counter at the boarding gate to conduct necessary business, but they are not to be allowed to go beyond this point. The cardholder shall also bring this breach to the attention of the nearest Airport Security Officer.

Apart from a genuine emergency, no one is to gain access through any door by using the panic bar. If observed the cardholder shall bring this breach to the attention of the nearest Airport Security Officer.

NOTE: Failure to comply with these conditions will result in either Suspension or Revocation of an individual's permit and will result in them not being allowed access to both the AIRSIDE and SECURITY RESTRICTED AREAS of the Aerodrome.

Applicant's Signature:	Date: Cayman Islands Airports Authority	
P.O. Box10098, Grand C	ayman KY1-1001, Cayman Islands, Tel: (345) 943-7070, Fax: (345) 943-7072	
	Email: ciaa@caymanairports.com	



## **Authorised Signatory Declaration**

As the authorised signatory for the company, I confirm the following:

	Tick to Confirm
The recruitment and interview procedures conducted on the applicant comply with aviation security regulations.	Yes 🗆 No 🗆
In light of checks conducted on the applicant, I confirm that to the best of my knowledge there is nothing which suggests a lack of integrity or which otherwise reflects adversely upon the applicant's suitability to hold an unescorted security permit.	Yes 🗆 No 🗆
The applicant's right to work has been confirmed.	Yes 🗆 No 🗆
A 5 year employment verification check has been completed on the applicant.	Yes 🗆 No 🗆
I agree that, when the unescorted security permit is no longer required for the given purpose, I shall notify CIAA immediately.	Yes 🗆 No 🗆
The applicant has completed a recognised GSAT or equivalent training course.	Yes 🗆 No 🗆

Authorised Signatory Name:	Telephone:		
Job Title:	Email:		
Company Name:			
Signature:	Date:		

Cayman Islands Airports Authority



#### FOR OFFICIAL USE ONLY

Application	Approved for a period of Not Approved	Months/Years	
Reason for Refu	sal:		
Areas	ArrivalsDeparApronAll	tures	
Person Authoris	ing:		(Print Name)
Department:			
Signature:		Date:	
Pass Printed By	<u>.</u>		
Employee:			
Department:			
Signature:		Date:	
		inds Airports Authority	
P.O. Box2		yman Islands, Tel: (345) 943-7070, Fax: @caymanairports.com	(345) 943-7071