Maryland Port Administration
Identification Badge Application
All areas must be completed; typed or printed in ink.

SECTION A: To be completed by Applicant

Check One: New Applicant □   or   Renewal □

Name: _____   **Job Title:** _____
(Last Name, First Name, Middle Name)

Home Address: _____   **Contact Phone No.:** _____
(Street, City, State and Zip Code)

Employer Name & Address: _____
(Street, City, State and Zip Code)

Date of Birth: _____ **(mm/dd/yyyy) U.S. Citizen: Yes □ No □   Alien Number & Visa Code** (If applicable)**:** _____

ILA Port No. (If applicable)**:** _____   **TWIC or PIV (Circle one) Expiration Date:** _____

Driver's License No. or State ID No.: _____   **State DL or ID Issued By:** _____

Clearance Information: Have you ever been convicted of a crime (misdemeanor or felony) other than a minor traffic violation? **Yes □ No □**

If yes, provide details:_____
_____

I certify that information supplied on this form is true and complete. I understand that any knowingly erroneous, misleading or fraudulent information is sufficient grounds for denial and may subject me to criminal or civil liabilities for making any false statements. I also authorize the MPA to conduct any records check as necessary to verify the information I have provided.

Applicant Signature: _____   **Date:** _____

E-mail: _____ *(Essential for Automated Badge Renewal Notices)*

SECTION B: To be completed by Company Sponsor

Company Name: _____

Company Address: _____
(Street, City, State and Zip Code)

(Check Appropriate Boxes)

Facility Access: Dundalk □, Seagirt □, South Locust Point □, North Locust Point □, Masonville/Fairfield □, World Trade Center □

**Employee Type: MPA Employee □, Facility Employee □, Contractor/Vendor □, Law Enforcement/Agency Essential □, Security Guard □, ILA Member □,
Non-Facility Maritime Professional (ex. ship's agent) □, Other □ (specify)** _____

Building Access: (For MPA Use Only) DMT 91A Maintenance All □ or Limited, □ DMT 91C Storeroom □, DMT 97B Security All □ or Limited □, DMT 97B OESS □, DMT 97B MDTA Police □, DMT 97C MDTA P&E □, DMT 97C Operations □, DMT 97C Field Engineering □, DMT 96E Gate Security □, ACC 2200 □, SLPCT □, Security Booths □,   WTC □- Specify Suite(s) & Access Hours (24/7 or 6:00 am to 8:00 pm M-F)
_____

TWIC Escort Approved: Yes □ (*Final approval rests with the MPA Office of Security*)   **Emergency Essential: Yes □ No □** *(MPA Employees Only)*

_____   _____   _____
Signature of Authorized Company Signer   **Date**   **Director Signature** *(MPA Employees Only)*

Contact Phone No.: _____   **E-mail:** _____system@sta-balto.com_____

Submission Instructions: Email completed applications to MPA Office of Security as a pdf file to mpasecurity@marylandports.com

SECTION C: For Office of Security Use Only

Authorization for Terminal Access: □ **Yes** □ **No**   **Credential Type Issued:** □ Red (Law Enforcement/Agency Essential), □ Blue (Security Guard), □ Gold (Facility Employees & ILA Members), □ Green (Contractors/Vendors), □ Orange (Non-facility Maritime Professionals); □ White w/ Red Stripe (OOS Personnel), □ MPA-WTC One Badge (MPA Employees and Non-MPA Employees approved by the MPA Director of Security)

Comments: _____

OOS Approving Officer: _____   **Date:** _____