HOUSTON AIRPORT SYSTEM
AVIATION EQUESTRIAN SECURITY PROJECT
APPLICATION FOR PERMIT & USE OF EQUESTRIAN AREA

Please print legibly as this form is to be faxed

Name: _____
Last First Middle

Other Names: _____
Nicknames/Alias Maiden

Residence Address: _____
Number & Street Unit # City State/Province

_____
Postal Code/ZIP County Country Cell Phone Number Residence Phone Number

Date of Birth: _____ POB: _____ Driver's License No.: _____
Mo / Day / Year NCIC 2 Ltr Country ID Number

State

Race_____ Sex_____ Height_____Weight____ Birthplace_____
(City / State)

Email Address: _____
Personal/Home Employment/Work

Social Security Number or
National Identification Number: _____
(As Appropriate) Number Issuing Agency, If Not SSN

Citizenship Country:_____ Passport No.:_____ Passport Country:_____
NCIC 2 Ltr ID NCIC 2 Ltr ID

Alien Registration No.: _____ Non-immigrant VISA No.: _____

Prior Residences (if present residence is less than 5 years, then provide residences for last 5 years):

_____
Number & Street Unit # City State/Province Postal Code/Zip

_____
Country Residence Phone Number

_____
Number & Street Unit # City State/Province Postal Code/Zip

_____
Country Residence Phone Number

_____

Occupation: _____ Employer: _____

Address of Employment: _____
Number & Street Unit # City State/Province

_____
Postal Code/ZIP Country Employer's Telephone Number Employer's Web Address (URL), if any

Fax both pages to: (281) 233-3241 When Completed

What is the name of your Spouse
or Significant Other: _____
Last First Middle

Contact (In Case of Emergency): _____
Name

Address: _____
Number & Street Unit # City State/Province

_____
Postal Code/ZIP Country Emergency Telephone Number

I affirm and represent that I am not a member nor associate of any group or organization that is listed as a Terrorist Organization by the government of the United States of America, or by the European Union, or by the United Nations or that advocates violence against the government of the United States or any political subdivision thereof, or against the citizens or residents of the United States or any other nation or any sector of the citizens or residents of the United States or of any other nation. I further affirm and represent that I do not have any litigation or claims pending against the City of Houston or the Houston Airport System.

I authorize and grant permission to the Houston Airport System, Public Safety Division, to conduct background investigations, including the running of credit headers for address, employment and other identifying information (but not of a full credit report nor credit scoring report) and to redo the investigation, from time to time, on me to the extent and with the frequency that they, in their sole discretion, deem prudent. I understand I may be required to submit to fingerprinting and upon request will readily do so. I understand and agree that HAS has absolute and complete discretion in issuing or denying this Permit and the Applicant acknowledges and agrees that the Applicant has no right or interest or entitlement, either at common law or by constitution, statute or ordinance to said Permit or to use the area for which I am seeking a Permit to use and that I need not be provided any reason for a denial. In the event that a Court of competent jurisdiction would find that such a right or interest or entitlement existed, Applicant does hereby waive such right or interest or entitlement and agrees that considering the security ramifications and interests of HAS in maintaining security, as HAS deems appropriate, for the proper and safe operation of George Bush International Airport (IAH) and for the security of the flying public, and the public using IAH, that such waiver is for the public good and not against public policy. Applicant further acknowledges and agrees that if granted the Special Access Permit to the Restricted Public Area, that it is revocable and/or non-renewable, in the sole discretion of the Director of the Houston Airport System, or their designee, without notice of any kind and without cause and that I need not be provided any reason for the denial or revocation.

I acknowledge that this is an official government document obtained for purposes of security and issuing a Special Access Permit to a Restricted Public Area. Under penalty of perjury, I, the undersigned Applicant, do hereby state and affirm that the foregoing information I have provided in this application is true, correct and complete

_____ _____
Applicant's Signature Date of Signing

Witness: _____ **Fax both pages to: (281) 233-3241**