

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 \square or Renewal \square | |
|--|---|
| Name: (Last Name, First Name, Middle Name) | Job Title: |
| (Last Name, First Name, Middle Name) | |
| Mailing Address: (Street, City, State and Zip Code) | Contact Phone No.: |
| 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 \square No \square | |
| 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: | ssential for Automated Badge Renewal Notices) |
| SECTION B: To be completed by Company Sponsor | |
| Company Name: | |
| 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) | |
| \square , SLPCT \square , Security Booths \square , IT Rooms \square , SHA Tower Shed \square , 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 S | ecurity) Emergency Essential: Yes No (MPA Employees Only) |
| Signature of Authorized Company Signer | Date Director Signature (MPA Employees Only) |
| Contact Phone No.: | E-mail: |
| 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 and MDOT IT employees) | |
| Comments: | |
| OOS Approving Officer: Date: | |