Maryland Port Administration
MPA Terminal Identification Badge & Renewal Request 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: _____   **Daytime Contact Phone No.:** _____
(Street, City, State and Zip Code)

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

Date of Birth: _____   **U.S. Citizen:** ☐ Yes ☐ No   **Alien Registration Number & Visa Code** (If applicable)**:** _____

ILA Port No. (If applicable)**:** _____   **TWIC Expiration Date:** _____

Driver's License No. or State ID No.: _____   **State of Issuance:** _____

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 Address: _____

Section B: To be completed by Company Sponsor

Company Name (Employer): _____

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

Terminal Access: *(Check Appropriate Box)* **Dundalk:** ☐ **Seagirt:** ☐ **South Locust Point:** ☐ **North Locust Point:** ☐ **Masonville/Fairfield:** ☐

Employee (Applicant) Type: Facility Employee ☐ Contractor/Vendor ☐ Essential MPA Employee ☐ Non-Essential MPA Employee ☐ Law Enforcement ☐
Security Guard ☐ ILA Member ☐ Non-Facility Maritime Professional (ex. ships Agent) ☐ Other ☐ (specify) _____

Building Access: (For MPA Use Only) *(Check Appropriate Box)* DMT 91A/Maintenance ☐ DMT 91C/Storeroom ☐ DMT 97B Security ☐ IT Rooms ☐
DMT 97B MdTA Police ☐ DMT 97C/MdTA Police P&E ☐ DMT 96E/Gate Security Bldg. ☐ ACC 2200 ☐ Cruise Terminal ☐ Security Guard Booths ☐

TWIC Escort Approved: ☐ Yes **(***Final approval rests with the MPA Office of Security***)**

_____   _____   _____
Print Name of Authorized Company Signor and Title   **Signature**   **Date**

Daytime Phone No.: _____   **E-mail Address:** _____

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**)** ☐ Blue **(**Security Guard**)** ☐ Plum **(**Essential MPA Employee**)** ☐ Gold **(**Non-essential MPA Employees, Facility Employees & ILA Members**)** ☐ Green **(**Contractors/Vendors**)** ☐ Orange **(**Non-facility Maritime Professionals**)**

Comments: _____

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

OOS 3 (Rev. 02/15/23)