



Vancouver Airport Authority
Airside Vehicle Operators Permit (AVOP) – TRANSFER

| | | | | | |
|--|--|------------------------------------|---|----------------------|--|
| APPLICANT | | | | | |
| Surname: | | First Name: | | Middle Name(s): | |
| Email: | | | | | |
| Current AVOP Designation (choose one) | | <input type="checkbox"/> D/A | <input type="checkbox"/> D/A Green | | |
| PROVINCIAL / TERRITORIAL / STATE DRIVER'S LICENSE | | | | | |
| Jurisdiction: | | Class: | | License Number: | |
| AIRPORT RESTRICTED AREA IDENTIFICATION CARD (RAIC) | | | | | |
| YVR ID Number: YVR123456 | | Company: | | | |
| <input type="checkbox"/> Temporary | | <input type="checkbox"/> Permanent | | | |
| I hereby certify that, to the best of my knowledge, all the information provided above is correct. | | | | | |
| Signature: | | | Date: YYYY / MM / DD | | |
| EMPLOYER STATEMENT | | | | | |
| Company: | | | | | |
| Telephone Number: | | | Email: | | |
| An Airside Vehicle Operator's Permit is required for the above named person to perform the duties of their assigned position. They have been trained in the AVOP procedures as outlined in the Airside Traffic Directives by a certified trainer as assigned by this company. | | | | | |
| Company Signing Authority (Please Print Name) | | | Company Signing Authority (Signature) | | |
| | | | | | |
| Company Certified Trainer (Please Print Name) | | | Company Certified Trainer (Signature) | | |
| FOR YVR & Company Examiners USE ONLY | | | | | |
| Confirmed AVOP Status | | <input type="checkbox"/> Yes | <input type="checkbox"/> AVOP Violations (6 Months) | | |
| Transfer Approved | | <input type="checkbox"/> Yes | <input type="checkbox"/> No (list reasons below) | | |
| YVR Representative: | | | | Date: YYYY / MM / DD | |
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