Ensure all details filled up in Section A

		Applic	cation	For Airti	eld Driving Pe	rmit			
Sect	ion A – Personal Parti	culars (all fields to	be compl	eted by applica	nt)				
Name	(in block letters) as indic	ated in NRIC/Passp	ort		NRIC/F	IN No.	Gender (pleas	e circle)	
							Male / Fe	male	
Comp	any Name (in block letter	3)			Date of	Birth	Nationality		
Mailin	g Address				Designa	tion			
	pore Driving Licence e circle)	Foreign Driving L Country Issued 8		tion Obtained	Mobile N	Number	Office Telepho	ne	
	A / 3C / 3CA / 4 / 5	Country issued a	Glassilica	ion obtained					
Self-Cl	heck List for Applicant (ple	ase tick)	For Offi	dal Use			Signature 8	& Date	
Airport State D	Work Permit (front & back) Pass (front) Orlving License (front & back) Certificate / Self-Study lette								
	i Cert (if applicable)								
prior m (a)	y resignation from service. I a no person shall drive a vehicl driving permit authorising hin shall contact the relevant ago	am fully aware that - le of any description (o n to drive a vehicle of t	ther than a w that descripti below, as and	ehicle used for tran on within the airsid			is the holder of a va		
		rt Police Division: 65			Fault Management Centre: 6541 2424				
	Signat	ure of Applicant		_		Date of Applicatio	en .		
Sect	ion B – Endorsement	& Declaration by E	mployer a	nd/or Airport A	gency				
By sigr applica includir stipulat (a)	ning on this Form, I, on beh nt, supporting documents gi gg any amendments issued do in this form and surrent employ or permit another pe so employed or permitted to y agree that the company st	alf of my company, so ven are true and corre (e.g. Airside Safety No r his/her ADP to CAG rson to drive a vehicle drive is the holder of a tall indemnify and hold	ipport this ap ect. I underta office, Airside If he/she has of any descr a valid airfield	oplication, agreed to ke to comply with Operations Notice resigned from sen option (other than a didn'ing permit aut AG its officers and	to the Conditions of Application the provisions in the CAAS By, etc) from time to time. I shall doe. I am fully aware that no p vehicle used for transport by a horising him to drive a vehicle employees against any and a to by reason of any act omission.	y-Laws (2009) and Airsid II ensure that the applical erson shall – a disabled person) within of that description within all loss or damage to prop	le Driving Theory H nt understood the of the airside unless to the airside. Derty or bodily injury	Handbook, conditions the person y or death	
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Name	e, Designation & Signatur	e of Airport Org.	_	Company Sta	amp & Date of Endorsemen	nt Email /	Address & Conta	ct No.	



Section A - Personal Particulars (all fields to be completed by applicant) Name (in block letters) as indicated in NRIC/Passport NRIC / FIN No. Gender (please circle) Male / Female Company Name (in block letters Date of Birth Nationality Mailing Address Designation Foreign Driving License-Mobile Number Office Telephone Country Issued & Classification Obtained (please circle) Self-checklist to assist 3/3A/3C/3CA/4/5 you to attach all the Signature & Date Self-Check List for Applicant (please tick) For Official Use NRIC/Work Permit (front & back) Almort Pass (front) necessary documents State Driving License (front & back) Course Certificate / Self-Study letter I hereby declare that the information given by me is true and correct. I understood and agreed to abide by the conditions stated overleaf, in Civil Aviation Authority of Singapore (CAAS) By-Laws (2009), Airside Driving Theory Handbook and any amendments issued (e.g. Airside Safety Notice, Airside Operations Notice, etc.) from time to time. I shall surrender my Airfield Driving Permit (ADP) to Changi Airport Group (S) Pte Ltd if my state license has been revoked by Singapore Traffic Police / Regulatory Authority and prior my resignation from service. I am fully aware that -(a) no person shall drive a vehicle of any description (other than a vehicle used for transport by a disabled person) within the airside unless he is the holder of a valid airfield driving permit authorising him to drive a vehicle of that description within the airside; and (b) shall contact the relevant agencies at the hotlines below, as and when required. Airport Emergency Services: 6541 2525 Medical Emergency: 6543 2223 Airport Police Division: 6546 0000 Airport Management Centre: 6541 2273/ Fault Management Centre: 6541 2424 Signature of Applicant Date of Application Section B - Endorsement & Declaration by Employer and/or Airport Agency By signing on this Form, I, on behalf of my company, support this application, agreed to the Conditions of Application (as stated overleaf), verified that the details of the applicant, supporting documents given are true and correct. I undertake to comply with the provisions in the CAAS By-Laws (2009) and Africade Driving Theory Handbook, including any amendments issued (e.g. Airside Safety Notice, Airside Operations Notice, etc) from time to time. I shall ensure that the applicant understood the conditions stipulated in this form and surrender his/her ADP to CAG if he/she has resigned from service. I am fully aware that no person shall employ or permit another person to drive a vehicle of any description (other than a vehicle used for transport by a disabled person) within the airside unless the person so employed or permitted to drive is the holder of a valid airfield driving permit authorising him to drive a vehicle of that description within the airside. I hereby agree that the company shall indemnity and hold harmless CAG its officers and employees against any and all loss or damage to property or bodily injury or death sustained and legal fees and costs incurred by it or them or any third party whether or not by reason of any act omission neglect or default of the Applicant during the course of or consequent to the administering or conduct of the test. Email Address & Contact No. Name, Designation & Signature of Employer Company Stamp & Date of Endorsement

Name, Designation & Signature of Airport Org.

(if applicable)

Application For Airfield Driving Permit

Company Stamp & Date of Endorsement

Email Address & Contact No.



Name, Designation & Signature of Airport Org.

	Applicatio	n For Airfi	eld Driving Per	mit	
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Mailing Address			Designation	on	
Singapore Driving Licence (please circle)	Foreign Driving License- Country Issued & Classif	ication Obtained	Mobile Nu	ımber O	ffice Telephone
3/3A/3C/3CA/4/5	Country issued & classii	ication obtained			
Self-Check List for Applicant (plea	ase tick) For (Official Use			Signature & Date
NRIC/Work Permit (front & back) Airport Pass (front)					-
State Driving License (front & back)]
Course Certificate / Self-Study letter					
driving permit authorising him		iption within the airsid	sport by a disabled person) withing; and	n the airside unless he is the	e holder of a valid airfield
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Airpo	rt Police Division: 6546 0000 anagement Centre: 6541 2273	3/75	Fault Manage	ement Centre: 6541 2424	
Signati	ure of Applicant	_		Date of Application	_
Section B Endorroment	P Doolaration by Employe	r and/or Airport A	nonov.		
	aif of my company, support this ven are true and correct. I undi- et instructed safety holice, Alis- it instructed safety holice, Alis- rison to drive a vehicle of any de- drive is the holder of a valid air all indemnity and hold harmites incurred by it or them or any this incurred by it or them or any this	s application, agreed to entake to comply with ide Operations Notice has resigned from sen- escription (other than a field driving permit aut is CAG its officers and	o the Conditions of Application the provisions in the CAAS By-I, etc) from time to time. I shall in fice. I am fully aware that no per vehicle used for transport by a consisting him to drive a vehicle of employees against any and all	Laws (2009) and Airside Dri ensure that the applicant un son shall – disabled person) within the a that description within the a loss or damage to property	Iving Theory Handbook, iderstood the conditions iriside unless the person iriside.
Name, Designation & Signa	ture of Employer	Company Sta	mp & Date of Endorsement	Email Addr	ress & Contact No.

Company Stamp & Date of Endorsement

Email Address & Contact No.



Sign off to declare all

true and accurate

information provided is

Name, Designation & Signature of Airport Org

Name (in block letters) as indic	iculars (all fields to be completed b		NRIC / FIN No.	Gondon (nlas	en ainst
varrie (in block letters) as Indio	ateu iri NRIO/Passport		NRIO / FIN NO.	Gender (plea	ne arae
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3/3A/3C/3CA/4/5					
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Company Stamp & Date of Endorsement

Email Address & Contact No

*Airport organisation here refers to companies that are involved in supporting airfield operations, regulation, security, airlines and aircraft manufacturers. These companies include; government agencies (MHA, MINDEF, RSAF, etc.), Airport Operator- CAG, Airport Regulator- CAAS, ground handling agents (SATS & dnata), SIAEC, airlines, MROs, refueling companies, etc. Sub-contractors of the ground handling agents are not allowed to endorse the ADP application.

27/07/2021

ADP

Sign off by supervisor

to support the need for

Sign off by Airport

Organisation who

engaged your service

Ensure documents not defaced



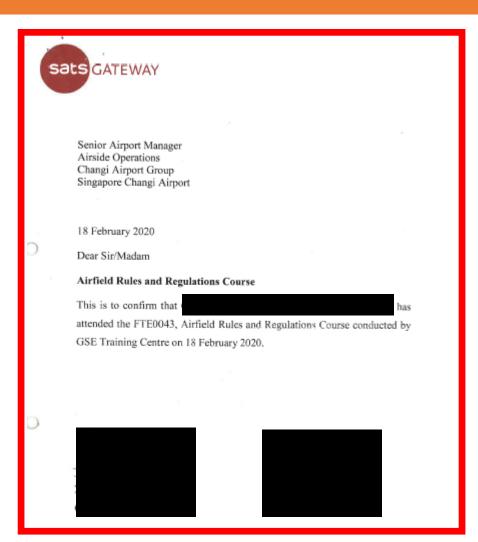
Attached the following document

- NRIC or Work Permit (scan QR code and print document) (front and back)
- 2. State Driving License (front and back)
- 3. Airport Pass (front only)

27/07/2021

- 4. Airfield Rules and Regulations Course Cert (valid for 3 months) or self-study letter from company
- 5. Medical Cert (65 years old and above, valid for 3 months, stating 'Fit to Drive')
- 6. Receipt from payment through https://tinyurl.com/payadc

Ensure documents not defaced



Attached the following document

- NRIC or Work Permit (scan QR code and print document) (front and back)
- 2. State Driving License (front and back)
- Airport Pass (front only)
- 4. Airfield Rules and Regulations Course Cert (valid for 3 months) or self-study letter from company
- Medical Cert (65 years old and above, valid for 3 months, stating 'Fit to Drive')
- Receipt from payment through https://tinyurl.com/payadc

Ensure documents not defaced

The applicant is physically and mentally dVIVIVE Fit / Unfit for

Remarks: no history of diabetes and high blood pressure. Fit / Unit for Airfield Driving Permit

certify that I have this day examined and identified the patient who is the applicant named above. From the medical history given and the clinical examination done, I am of the opinion that the above patient is fit to work as a airfield driver, as at the time of consultation.



Airfield Rules Test (ART) & Airfield Driving/Safety-Compliance Test (ADSCT)

- 1. Applications to arrive 15 minutes prior to tests for documents verification
- 2. Applicants who arrive later than designated test slot will not be permitted to take test
- 3. Applicants to produce NRIC/Work permit, Seasonal airport pass, State Class 3 driving license
- 4. Applicants to pass ADSCT within 3 months after clearing ART
- Test will be considered fail should the vehicle be not in good working condition













- 1. Drop you documents into the drop box provided in ADC
- 2. Applicants will be notified via mobile message service WhatsApp
- 3. Incomplete forms will be rejected. Rejected application will not be returned.
- 4. Payment by Mastercard/Visa only









