

## AirTera Order Form

Rev. 20250322

Effective September 9, 2024

SECTION A: C	OMPANY	INFORMATION										
Company Name							AirTera Client ID:					
Street Addres	S									·		
City					State				Z	ip		
Company Adr	nin Name					Title						
Email							Pho	one numbe	er			
SECTION B: E	MPLOYEE	I APPLICANT INFO	RMATION									
First Name	t Name Last Name			Middle Nam				Name				
Street Addres	s											
City			•		State							
Zip Code			Country o	f Reside	ence							
Date of Birth			Social Se	curity Nu	ımber *							
SECTION C: E	BACKGRO	UND CHECK SERVI	CES									
FAA Pilot Records Database Records Retrieval (per employee) 1 \$99.								\$99.95				
FAA Pilot Records Database Historical Record Entry Enrollment - AirDock DOT & FAA Database non-subscribers (per employee)  \$99.99								\$99.95				
FAA Pilot Records Database New Record Entry (per page) <sup>1</sup>								\$5.00				
FAA Pilot Records Database Historical Record Entry Enrollment - AirDock DOT & FAA Database subscribers (per employee) \$69.							\$69.95					
National Driver Register Check (NDR)								\$49.95				
Drug & Alcohol History Records Request (per employer)								\$59.95				
DASSP Airman File Check								\$59.95				
Motor Vehicle Driving Record Check 3 & 4									\$32.95			
FAA Certificate/License Check								\$29.95				
FAA A	FAA Accident, Incident and Enforcement (AIE) Report <sup>2</sup>								\$59.95			
U.S. E	U.S. Employment Verification (per employer) 3 & 4 \$21.95								\$21.95			

<sup>\*</sup> If employee is already in the AirTera platform, only the last four digits of the SSN are required.

<sup>&</sup>lt;sup>1</sup> AirDock DOT & FAA Database subscription pricing applies.

<sup>&</sup>lt;sup>2</sup> If ordering PRD Retrieval service, this check is automatically included.

<sup>3</sup> A \$25.90 application-processing fee will be charged for web-enabled services per employee/applicant.

<sup>4</sup> Direct pass-through expenses shall be invoiced. If submitting by email, please send to services@natacs.aero.



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## ORDER FORM BACKGROUND CHECK SERVICES

that are unaccounted for. If you we
nemployed. Use a space for <b>milita</b> l Please provide explanations for an
untry
pervisor's Name
Date of Birth

FAA PILOT RECORDS DATABASE (PRD) REQUEST

DOT DRUG & ALCOHOL RECORDS REQUEST NATIONAL DRIVER REGISTER (NDR) RECORD REQUEST



## ORDER FORM BACKGROUND CHECK SERVICES

Employer:	Employee Full Name	:						
	Employee Social Security Number	:						
J. RELEASE AND CONSENT FOR A BAC	KGROUND CHECK:							
I certify that all answers given here in this 5 page form are true and complete to the best of my knowledge. I authorize the investigation of all matters contained in this application and hereby give								
I agree that EMPLOYER may, at its sole discretion, deny me employment, require that I be removed from a temporary assignment or discharge me from employment if the information received in the investigation is considered unfavorable by EMPLOYER. Any offer of employment or continuing employment (if currently employed) by EMPLOYER is subject to and conditioned upon EMPLOYER'S review of such information.								
In the event of an offer of employment, subsequent employment, and/or continuing employment, I understand that false, misleading or omitted information in my application/background check information shall be grounds for withdrawal of an offer of employment or discharge at any time.								
Notice to Applicant/Employee regarding consu	mer rights under the Fair Credit Reporting	g Act:						
The Fair Credit Reporting Act (FCRA) governs the activities of consumer credit reporting agencies, as well as the users of the information procured from these agencies. A consumer report contains information on a consumer's (job applicant's) character, reputation, and other personal data. Employers to screen job applicants procure these reports. Employer agrees to comply with all aspects of the Fair Credit Reporting Act and any applicable Federal or State equal employment opportunity law or regulation.								
Among other things, the FCRA prohibits Users (Employers) from obtaining consumer reports unless the Employer discloses to the applicant, in writing, (The "REQUEST, AUTHORIZATION, CONSENT AND RELEASE FOR BACKGROUND INFORMATION" form) that such a report may be acquired. This disclosure must be in the form of a document that consists solely of the disclosure that a consumer report may be obtained for employment purposes. This release must also state that if the employer denies employment based on the information from an AGENT report, the applicant may make written inquiry requesting a disclosure of the nature and scope of the investigation.								
If an applicant makes such a request, AGENT will supply a complete and accurate disclosure of the nature and scope of the investigation within five days of the request. AGENT will reexamine any item the applicant holds to be incorrect at no additional charge and, if necessary, supply a corrected report to the original requester. AGENT keeps copies of each investigation for a period of not less than one year.								
If a consumer reporting agency or user of such information willfully fails to comply with and FCRA requirements, the Consume Reporting Agency and its agents are responsible to the subject of the report. AGENT complies with all the regulations set forth by the FCRA.								
In addition, any individual who knowingly and will be fined not more than \$5000.00 and imprisoned in		porting agency under false pretenses wil						
AGENT complies with and supports all provisions of the Fair Credit Reporting Act (FCRA). We urge all employers to review its restrictions and requirements. The Act's citation is Public Law 91-508, Title 15, U.S.C. Sections 1681, et seq. Please note, particularly, the Permissible Purposes of Reports, as well as requirements on Users of Consumer Reports and Obtaining Information Under False Pretenses.								
I have read this release and consent form and und significance.	derstand all of its terms. I execute it voluntari	ly and with full knowledge of its						
EMPLOYEE/APPLICANT SIGNATURE	PRINT NAME SOCIAL SECURITY	DATE						