



COUNTY of VENTURA
Department of Airports

555 Airport Way, Suite B
Camarillo, Ca. 93010
Phone: (805) 388-4372
Fax: (805) 388-4366
<https://airports.venturacounty.gov>

GATE CARD APPLICATION

GATE CARD APPLICANT INFORMATION (*PLEASE PRINT*) () NEW (\$20) () REPLACEMENT (\$16)

NAME (Last, First, Middle Initial)		DRIVER'S LIC:	
BUSINESS NAME		HOME PHONE	CELL PHONE
STREET ADDRESS		CITY	STATE ZIP
EMAIL ADDRESS			
APPLICANT AFFILIATION (Fill all that apply)			
Camarillo Airport _____ Hangar or Tie-down Tenant Hangar/Tie-down # _____			
Oxnard Airport _____ Airport Business Staff/Tenant Business _____			
Both _____ Other _____ Explain _____			

This gate card is issued in accordance with Ordinance 4040, Section 6507-1. I shall immediately report any loss or theft of this gate card to the County of Ventura Department of Airports. I understand that this card may be revoked at any time if I fail to abide by the Airport rules and regulations. I acknowledge that the gate card is an outright/non-refundable purchase.

APPLICANT SIGNATURE _____ DATE _____

ADMINISTRATIVE USE ONLY

Authorized Gate Group:	Driver's Training Date:
Date Activated:	Remarks:
Fee Paid: Yes() No() (Explain _____)	
Gate Card Number Issued:	
<div style="text-align: center;">_____ Airport Representative</div> <div style="text-align: center;">_____ Date</div>	
<input type="checkbox"/> Data Entry	