

<<<<Company Headed Paper>>>>

Strictly Private and Confidential

Name
Address

[DATE]

Dear Sir

Re: [NAME] Date of Birth:
Address:.....

The above named applicant has indicated that you are prepared to provide a gap reference to accompany the application for an Airport Security ID Pass. He/she has authorised us to contact you for verification of identity, activities (e.g. travel) whereabouts (e.g. country of travel) and/or status (e.g. homemaker, carer) for the following period/s:

From: **[DATE]** To: **[DATE]**

I should therefore be grateful if you would complete the attached questionnaire and return it to me as soon as possible. This information will be required to secure an identity pass and information will be shared with London City Airport and possibly with the control authorities.

It is worth noting that each gap will require a separate reference, from separate referees unless more than one gap falls within a 12-month rolling period. Here, a single reference will be acceptable for multiple gaps within that 12-month period.

Please return this page along with the reference.

You are respectfully advised that it is an offence, under the Aviation Security Act 1982, as amended by the Aviation and Maritime Security Act 1990, to knowingly give false information, either for the purpose of, or in connection with, an application for an Airport Security ID Pass.

The following must not provide gap references on behalf of an ID Pass applicant: blood relatives, current or ex relatives by marriage, relatives by adoption - including cousins, current or ex partners and their relatives, persons living at the same address, current employees of the ID Pass Sponsoring Company or individuals under the age of 16 years. If you fall into this category, please advise me.

You maybe contacted the London City Airport Security Team to verify this reference.

We may not be able to offer employment unless this reference is returned and verified, therefore an early reply would be appreciated.

May I thank you in anticipation for your cooperation in this matter and assure you that your reply will be treated in the strictest confidence.

Yours faithfully

Name
Position in Company

GAP REFERENCE

Gap From: [DATE] **To:** [DATE]

Requested by:

Applicants Name: Also known as:

D.O.B.

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1. The dates of the gap(s) being covered, at the top of this page, are accurate.

Please state **Yes** or **No**:

If “no” please provide correct dates:

From:/...../..... **To:**/...../.....
Day/Month/Year Day/Month/Year

2. How long have you known the applicant (minimum of 24 months):

.....

3. Are you related to the applicant? * (see footnote). Please state **Yes** or **No**:

If you have answered “yes” do not proceed but please contact the person signing the covering letter.

If you have answered “no”, in what capacity is the applicant known to you:

.....

4. Was the applicant in the United Kingdom during this period? Please state **Yes** or

No:

If “no” please provide details of the countries of residence or travel:

.....

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5. Was the applicant employed during this period? Please state **Yes** or **No**:

If you have answered "yes" please provide details:

.....
If you have answered "no" please provide the following information:

Where did the applicant reside?

What were they doing during this time?.....

How did the applicant financially support themselves during this period?

6. To the best of your knowledge, is there anything known about the person named in this reference which suggests a lack of integrity or otherwise reflects adversely upon their suitability to hold an Airport Security ID Pass allowing them access to sensitive areas of London City Airport? Please state **Yes** or **No**:

If you ticked 'Yes' please provide reason/s.

7. Are there any further comments you would like to make in relation to the applicant's character:

8. Please state your Profession or Occupation:

Please ensure that the details provided are from your own personal knowledge as any inconsistency in information may delay the issue of an identity pass.

If you are going to be unavailable for contact any time during the next 6 weeks please enter those dates below or on a separate piece of paper. Thank you for your cooperation. Your comments will be most useful in assisting us to reach a decision on this appointment.

Dates when unavailable: From To

Signature: Address:

Print Name:

Home Tel No:

Mobile Tel No: Email:

Daytime Tel No: Date: