



## AIRPORT SECURITY IDENTIFICATION BADGE RENEWAL APPLICATION

THIS FORM MUST BE LEGIBLE. PLEASE DO NOT BEND OR FOLD.

APPLICANT INFORMATION						
Last Name:		First Name:		Middle Name:		
Date of Birth:		SSN:		Gender:		
Current Address:						
City:		State:	ZIP Code:		Address Change:	
Email:		Phone:	Cell:	Emergency	/ Contact Change: 🗆 Yes 🗆 No	
Opt-in for Airport Security and Information Alerts (Check all that apply):						
BADGE HOLDER RESPONSIBILITIES						
<ol> <li>Security Identification Badges remain the property of the Tallahassee International Airport (TLH) and must be visibly displayed above the waist and on the outermost garment at all times.</li> <li>Security Identification Badges must be presented for inspection if requested and must not be loaned or given to anyone else.</li> <li>IMMEDIATELY NOTIFY AIRPORT OPERATIONS OF LOSS OR THEFT OF A SECURITY IDENTIFICATION BADGE.</li> <li>If lost or unreturned, a charge for a replacement Security Identification Badge will be assessed against the Security Identification Badge Holder and/or the Authorized Signatory's company in the amount indicated in the approved Airport Schedule of Rates and Charges.</li> <li>Security Identification Badge-holders shall comply with Airport Rules &amp; Regulations available at: <a href="http://www.TLHAirport.com/">http://www.TLHAirport.com/</a></li> <li>When accessing security doors and perimeter gates that provide access to restricted areas, individuals must present their Security Identification Badge, enter PIN code/Fingerprint and then pass through each security door/gate individually. The door/gate must close completely and if a door, be verified secured using the "push/pull procedure" before leaving and the next person attempts to enter.</li> </ol>						
APPLICANT AGREEMENT						
<ul> <li>I have read and understand the above responsibilities, and my security responsibilities as listed under 49 CFR 1540.105(a).</li> <li>The information I have provided is true, complete, and correct to the best of my knowledge and belief and is provided in good faith. I understand that a knowing and willful false statement can be punished by fine or imprisonment or both (see Section 1001 of Title 18 of the United States Code)</li> <li>I authorize the Social Security Administration to release my Social Security Number and full name to the Transportation Security Administration, Enrollments Services and Vetting Programs, Attention: Vetting Programs (TSA-10)/Aviation Worker Program, 6595 Springfield Center Drive, Springfield, VA 20598-6010.</li> <li>SCREENING NOTICE: Any employee holding a credential granting access to a Security Identification Display Area may be screened at any time while gaining access to, working in, or leaving a Security Identification Display Area.</li> <li>I am the individual to whom the information applies and want this information released to verify that my SSN is correct. I know that if I make any representation that I know is false to obtain information from Social Security records, I could be punished by a fine or imprisonment or both.</li> </ul>						
Full Name (Print):			Date:	Date:		
Signature:			TLH Badge No	TLH Badge No.:		
COMPANY AUTHORIZATION (AUTHORIZED SIGNATORY ENDORSEMENT)						
I have read and understand the responsibilities governing Airport Security Identification Badges, authorize TLH to issue the above employee a TLH Security Identification Badge, and attest that the above individual understands the above responsibilities, their security responsibilities as listed under 49 CFR 1540.105(a), and has a documented need for unescorted access authority to the AOA, SIDA, Sterile, or Public Areas of the TLH Airport.						
Name (Print):			Date:	Date:		
Signature:			TLH Badge No	TLH Badge No.:		
Company:						
Escort Authorization Requested: 🗆 Yes 🗆 No Driving Privileges Requested: 🗆 Non-Movement Area 🗅 Movement Area 🗅 None						
AIRPORT OPERATIONS AUTHORIZATION						
Escort Authority:  Yes No		Driving Privileges: <ul> <li>Non-Movement Area</li> <li>Movement Area</li> <li>None</li> </ul>	Movement Area Element Area		in Rap Back or completed 5-Year It History Verification? No 🗆 N/A	
Badge #:	Badge Type:	Badge Issue Date:		ASC Approv	al:	