



YUMA INTERNATIONAL AIRPORT
COMPANY APPLICATION FOR AUTHORIZED SIGNATORY
ONE APPLICATION PER AUTHORIZED REPRESENTATIVE

This form must be completed and signed in the presence of a Notary Public or in the presence of badging office personnel.

The Yuma County Airport Authority welcomes you to Yuma International Airport. With the approval of this application, you will be joining a team that is dedicated to ensure the security of Yuma International Airport.

The form requires your company to delegate specific representatives of your firm to be named as authorized signers for airport security badges. You can have as many authorized signers as you wish, simply complete one of these forms for EACH authorized signer.

These individuals must complete: 1. Badge Application. 2. Security Threat Assessment (STA) 3. Criminal History Records Check (CHRC) 4. Authorized Signatory Training and Exam. ONLY THESE INDIVIDUALS WILL BE ALLOWED TO SIGN YOUR EMPLOYEE'S BADGE APPLICATION REQUEST.

COMPANY NAME: _____

MAILING ADDRESS: _____
STREET / PO BOX CITY STATE ZIP

LOCAL ADDRESS: _____
(If different than above) STREET CITY STATE ZIP

COMPANY PHONE NO.: (____) _____ - _____ COMPANY FAX NO.: (____) _____ - _____

COMPANY E-MAIL ADDRESS: _____

NAMES AND SIGNATURE OF COMPANY REPRESENTATIVE AUTHORIZED TO CHANGE ACCESS LISTS OR AUTHORIZE:
(mark 'x') BADGES ONLY [] KEYS ONLY [] BADGES AND KEYS []

PROPOSED AUTHORIZED SIGNATORY SOCIAL SECURITY NUMBER DATE OF BIRTH
SIGNATURE DATE

WE ARE AWARE AND AGREE TO COMPLY WITH THE FOLLOWING (Please Initial):
ALL COMPANY EMPLOYEES REQUIRING A YUMA INTERNATIONAL AIRPORT ID BADGE MUST COMPLETE AND PASS A STA PRIOR TO THE ISSUANCE OF THE BADGE.
THOSE APPLICANTS THAT REQUIRE SIDA ACCESS WILL REQUIRE A CRIMINAL HISTORY RECORD CHECK PRIOR TO THE ISSUANCE OF THE BADGE.
THE COMPANY IS RESPONSIBLE FOR THE MONITORING, AND RETURN OF ALL ISSUED BADGES AND KEYS TO THE YUMA INTERNATIONAL AIRPORT BADGING OFFICE.
THE COMPANY WILL IMMEDIATELY NOTIFY THE BADGING OFFICE IF A BADGE OR KEY IS LOST, STOLEN OR NOT RETRIEVED FROM A TERMINATED EMPLOYEE.
FAILURE TO COMPLY WITH ANY OF ABOVE COULD RESULT IN THE REVOCATION OF YOUR COMPANY'S PRIVILEGE TO HAVE ACCESS TO THE AIR OPERATIONS AREA AND/OR SIDA. YOUR COMPANY FURTHER AGREES THAT IT WILL REIMBURSE THE YUMA COUNTY AIRPORT AUTHORITY FOR ANY FINES LEVIED AGAINST IT AS A RESULT OF VIOLATIONS COMMITTED BY YOUR COMPANY, ITS EMPLOYEES OR REPRESENTATIVES.

COMPANY REPRESENTATIVE POSITION WITH COMPANY DATE

This form was signed before me this _____ day of _____, 20_____.

SIGNATURE

AIRPORT OPERATIONS AUTHORIZATION:

Training: _____/_____/_____
CHRC Case #: _____
STA: _____/_____/_____

Notary Public in and for:
County: _____
State: _____
My commission expires:
_____ day of _____ 20 _____