

RESTRICTED AREA ACCESS REQUEST

All authorized signatories must be on record with the Airport Badging Office.

TENANT/SPONSOR OF BADGE:

I am requesting access as indicated below for the following employee(s) or tenant. I do hereby verify that the employee(s) or tenant(s) listed below have an operational need to have access to the doors/clearance as indicated below.

AUTHORIZED SIGNATORY'S SIGNATURE: _____

DATE: _____

AUTHORIZED SIGNATORY'S PRINTED NAME: _____

AS BADGE # _____

TYPE OF ACCESS BEING REQUESTED: ☐ CARD READER ☐ CYBERKEY

BADGE HOLDER NAME	BADGE #	TENANT NAME	ACCESS REQUESTED (Card # or door # for Cyberkey)

Justification and Duration: _____

TENANT RESPONSIBLE FOR RESTRICTED AREAS BEING REQUESTED (if applicable):

Name of Tenant: _____

I do hereby permit the employee(s) or tenant(s) listed below to have access to the doors/clearance as indicated. They are hereby authorized to enter the work area or office spaces occupied by my company.

AUTHORIZED SIGNATORY'S SIGNATURE: _____

DATE: _____

AUTHORIZED SIGNATORY'S PRINTED NAME: _____

AS BADGE # _____

BADGING OFFICE USE ONLY

Request: ☐ APPROVED ☐ DENIED

Data entry completed on: _____
(Date and Initials)

Approved By: _____