



**PENSACOLA GULF COAST REGIONAL AIRPORT
IDENTIFICATION BADGE REQUEST FORM**

BADGE #

EXPIRATION DATE

LAST _____ FIRST _____ MIDDLE _____

MY ADDRESS _____

CITY _____ STATE _____ ZIP _____

WORK PHONE _____ HOME PHONE _____

MOBILE PHONE _____ EMAIL _____

EMPLOYER/SPONSOR _____

SSN _____ DATE OF BIRTH _____

HEIGHT _____ WEIGHT _____ HAIR COLOR _____ EYE COLOR _____

I _____ acknowledge that the Air Operations Area (AOA) access badge that has been issued to me is the property of the Pensacola Gulf Coast Regional Airport. I will return it to my supervisor/sponsor when my employment/lease/membership at the Pensacola Gulf Coast Regional Airport has been terminated. I am also required to report it to my supervisor/sponsor when the access badge is lost, misplaced or stolen. I am aware that a \$100.00 LOST FEE will be levied for lost, misplaced or stolen badges. In addition, a \$10.00 REPLACEMENT FEE will be levied before a replacement badge will be issued. 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.)

APPLICANT SIGNATURE

DATE

I _____ request that the named employee/applicant be issued a Pensacola Gulf Coast Regional Airport photo identification security badge. Before the application can be processed, employment history verification, including at a minimum, references, prior employment histories (MINIMUM OF FIVE YEARS), must be completed to the extent necessary to verify representations made by the employee/applicant. It is also certified that the applicant will complete all necessary 1542 Security Training by the Pensacola Gulf Coast Regional Airport Security Program through the Security Briefing. I, the Authorized Signer, am aware that a \$100.00 LOST FEE will be levied for lost, misplaced or stolen badges. In addition, a \$10.00 REPLACEMENT FEE will be levied before a replacement badge will be issued.

AUTHORIZED SIGNER

DATE

***** FOR AIRPORT ADMINISTRATION OFFICE USE ONLY *****

BADGE COLOR RED ACCESS AREA _____

SECURITY BRIEF _____ BADGE ISSUE DATE _____

1ST GOVT ISSUED PICTURE ID# _____ AGENCY _____ EXP _____

2ND ID _____ AGENCY _____ EXP _____

DL VALIDATION _____ RECEIPT # _____