

# SALT LAKE CITY DEPARTMENT OF AIRPORTS

## BADGE STATUS CHANGE APPLICATION



Salt Lake City  
Department of Airports

<b>Badge #</b>	<b>Person ID #</b>
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<b>SECTION 1 APPLICANT INFORMATION</b>	<b>Present this application along with one (1) form of identification. Type or print legibly using black or blue ink. Complete Sections 1 and 2. Incomplete forms will be returned.</b>
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<b>Last Name</b>	<b>First Name</b>	<b>Middle Initial</b>
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<b>SECTION 2 COMPANY INFORMATION</b>	<b>This section MUST be filled out by an authorized signer from the sponsoring company. Type or print legibly in ink or application will be rejected.</b>
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Employer	Sponsoring Company
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<b>CHANGE/UPGRADE</b>
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**(Signature required for those denoted with an \*)**

Damaged Card  
  Customs - (  Z1  Z2 )  
  AOA Driving (**DL verification required**)\*  
  Gate Guard\*  
  Escort Authority\*  
  Fuel Agent  
 Authorized Signer\*  
 Lost\*  
 Stolen (**Police report required**)\*  
 Company Name Change\*  
 Cipher Card \*  
 Emergency Response\*  
 Expiration Extension  
 Name Change  
 SPAO to SIDA\*  
 Other: \_\_\_\_\_

<b>REMOVE/DOWNGRADE</b>
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**(Signature required for all designation removals/downgrades)**

Customs - (  Z1  Z2 )  
  AOA Driving  
 Gate Guard  
 Escort Authority  
 Fuel Agent  
 Authorized Signer  
 Emergency Response  
 SIDA to SPAO (**ID required**)

<b>AUTHORIZING AGENT CERTIFICATION</b>
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AUTHORIZING AGENT NAME (Print):			
AUTHORIZING AGENT SIGNATURE:	<b>DO NOT SIGN UNTIL APPLICATION IS COMPLETED</b>		
Phone Number: (      )	Date:	Valid for 30 days after signed and dated	Signature Checked By

<b>IDENTIFICATION BADGE RECEIVED BY</b>	<b>This section must be completed at time of badge issuance.</b>
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Applicant's Signature **X** \_\_\_\_\_ Date \_\_\_\_\_

<b>SECTION 4 ACCESS CONTROL USE ONLY</b>
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Card Number	Training Date	Expiration Date	PIN Number	<input type="checkbox"/> Lost <input type="checkbox"/> Voided
Fee Paid: <input type="checkbox"/> \$50 <input type="checkbox"/> Waived ( <b>Manager must approve</b> )				Refund Amount Due
<input type="checkbox"/> Cashier Check <input type="checkbox"/> Company Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order		<input type="checkbox"/> \$0 ( <b>Expired</b> ) <input type="checkbox"/> \$25 <input type="checkbox"/> \$50		Lost Card No. Returned/ Date

**Warrants:**  Cleared  Referred (Verified By: \_\_\_\_\_)  
 **DL Verification:**  Valid  Suspended (Verified By: \_\_\_\_\_)

Comments	Issued By/Date
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May 2019