

Pensacola International Airport Authorization to Badge

AIRPORT PERSONNEL	
Person completing this form:	
COMPANY INFORMATION	
Company Name:	
Requesting Authorization to Badge for our Subcontractor: <i>If requesting authorization on behalf of a subcontractor please provide that Company information below.</i>	
Company Address:	
Company Telephone Number:	Fax Number:
Company Email Address: Company Website:	
Work to be completed and in what location:	
Authorized Signer Primary: Mobile Phone Number:	Email Address:
Authorized Signer Alternate: Mobile Phone Number:	Email Address:
CHECKLIST	
Date Contract or Lease starts :	Date Contract or Lease ends:
Is the Company going to be perpetually badged? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date that the badging process is to begin: <i>Authorized Signers should begin the process a minimum of two weeks before employees begin the process.</i>	
Date that the Company will be required to have all badges and keys turned into the ABO:	
Number of individuals to be badged:	
Will the company need Airport issued keys? <input type="checkbox"/> Yes <input type="checkbox"/> No unknown	
Will the company need to operate a vehicle inside of the Airport's perimeter fence? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Will the company need to operate a vehicle on any runways or taxiways? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> The Pre-Construction Meeting is scheduled on (date) <input type="checkbox"/> The Pre-Construction Meeting has not been scheduled yet. <input type="checkbox"/> Although the badging process can begin now, badges cannot be given to an individual until the Pre-Construction Meeting is complete. <input type="checkbox"/> A Pre-Construction Meeting is not applicable.	
When form is completed, please email to Charles Skelton at ciskelton@cityofpensacola.com.	
OPERATIONS USE ONLY	
Authorization to Badge: <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved <input type="checkbox"/> No Escort (NE)	
Training Required: <input type="checkbox"/> SIDA <input type="checkbox"/> AOA / Sterile Brief <input type="checkbox"/> Basic Security <input type="checkbox"/> NMA <input type="checkbox"/> MA	
Access Level: <input type="checkbox"/> Secured <input type="checkbox"/> SIDA <input type="checkbox"/> Sterile <input type="checkbox"/> AOA <input type="checkbox"/> Public	
Operations Signature: Carter D. Mansfield	Date: