NORFOLK AIRPORT AUTHORITY

Signatory Authority Request Form

Name: _____

Phone Number: _____

Company Name: _____

Company Address: _____

Company Phone Number: _____

As the Authorized Signatory you will be serving as the liaison between your company, your company's badge applicants and badge holders, the Norfolk Airport Authority, and the TSA. Communication between you and the Norfolk Airport Authority is paramount to ensure TSA Regulatory Compliance. The following outlines your responsibilities as an Authorized Signatory:

1. I understand to serve as an Authorized Signatory for my company I must submit to a TSA Security Threat Assessment and Criminal History Background Check, to be granted an airport access badge, and permitted to become an Authorized Signatory.
2. I understand I must obtain and maintain an airport access badge for my company that I am serving as an authorized signatory for.
3. I understand I am responsible for ensuring airport access badge applicants for my company must have an operational need to apply for an airport access badge, to include any endorsements, such as driving on the ramp, or escorting.
4. I understand I must ensure the applicant provides the proper I-9 documents of identification to apply for a new or renewal of an airport access badge.
5. I understand that I must adhere to all TSA Regulated Airport Badge Audits.
6. I understand it is my responsibility to maintain a list of all my company's airport badge holders, active and lost, for TSA Regulated Airport Badge Audits.
7. I understand that any airport access badge holder no longer needing access to the airport, or who has lost or had their badge stolen, or who has been separated from employment, I must immediately deactivate their airport access badge and return the airport access badge within 5 business days of separation.
8. I understand that any airport access badge that cannot be retrieved will be documented as lost or unaccounted for and counted against my company during TSA Regulated Badge Audits.
9. I understand that I must attend TSA Regulated Annual Signatory Training to maintain my Signatory Authority.
10. I understand that my Signatory Authority can be revoked at any time for TSA Regulatory Compliance Violations, and/or negligence in duties as an Authorized Signatory.
11. I understand that I am subject to TSA Civil Penalties, Badge Revocation, and/or Entry into the Central Revocation Database for up to five years for Airport Security Violations as an airport access badge holder.

Signature: _____ Date: _____