Airport Security

PORT OF PORTLAND

	Issued By:						
	(Badging Staff Initials)						
	Request #:						
	Security Key Serial #						

KEY REQUEST/RECEIPT FORM

				_		
Employee Name		First		Middle (Full) -		
Employer/Company _						
UPI D#						
		Authorized Signatory	y (AS) Must Sign			
(Key)	(Quantity)	(Key Code)	(Quantity)	(Key Code)	(Quantity)	
(Key)	(Quantity)	(Key)	(Quantity)	(Key Code)	(Quantity)	
As Authorized Signatory, my ir As Authorized Signatory, I cert				above in compliance with the Airpo	ort Rules and Regulations.	
Printed name of Author	ized Signatory	Loca	cal Phone#B/U or Project Task #		#	
Signature of Authorized	l Signatory	Date	NOTE: APPLICATION MUST BE SUBMITTED WITHIN 30 DAYS OF THIS DATE.			
I certify that all details on this a understand in which areas I am If I lose, damage or mutilate my All security keys are not transfe I understand that if I violate an this key, that my Restricted Are I certify that I have received the	n permitted access. y security key(s), I will notify the problem and must be returned up y laws or regulations, including a access privileges may be important to the permitted of the permitte	he Security Badging Office at onc pon resignation, termination or th g Port, Federal Aviation Administ amediately revoked and that I wil	e and apply, through my mana ne demand of a Port of Portland ration (FAA) and Transportation	ger, for a replacement security key d Representative, to the Security B	/. (See current fee schedule.) adging Office. gulations, pertaining to use of	
Employee Signature			Date			
	(Do NOT sign until ke	ys are received)				

Form 386 8-2015