

Colorado Residency Disclosure

Individuals requesting a brown Ground Transportation ID Badge from Airport Security must pass a 5 year background check. The Background must be clear of any disqualifying felony conviction as listed in TSR 1542.209. A background check must be conducted for year state of residence during the past 5 years. If you have lived in any other state(s) during the past 5 years, you must provide a complete address history for that period on the back of this form. You will not be issued an Airport ID Badge if you do not disclose all residences during the past 5 years.

you do not o	aisci(osc an	CSIGCI	ices dui	ing the	. past 5	, ycars.	•									
ull Name:									:	ocial :	Security Nu	mber					
street Addre	ss:								City:					State:			
Cip Code:					На	ave you	u conti	nuously			olorado for e reverse s				☐ Yes		No
certify that disclosure o complete a years.	f my	reside	ncy his	tory for	the pas	st 5 yea	ars. I ar	m autho	rizing l	Denve	r Internatio	nal Airı	port,	Airport	Security	, to	
Signature:													Dat	te:			
ndividuals r	reque ound for ye	DENVINTER NIRPO OGETH esting a must lear stat	ER NATIO RT HER WE a brow oe clea e of re	ONAL SOAR In Ground In of any sidence	d Trans disqual during	Co asportation	olition ID felony ast 5 ye	Badge convicears. If y	from A tion as ou have	esionesis esi esi esi esi esi esi esi esi esi	in TSR 1542 I in any oth	ust pass 2.209. A er state	s a 5 back	year background	ckgroun I check i e past 5	d chec must b years,	oe , you
must provid ou do not o		-			-	-			ack of 1	his foi	rm. You wil	II not be	e issu	ied an A	irport IL) Badg	e it
ull Name:										ocial :	Security Nu	mber					
treet Addre	ss:								City:					State:			
Zip Code:					На	ave you	ı conti	nuously			olorado for e reverse s	•	•		Yes		No
l certify that disclosure o complete a	f my	reside	ncy his	tory for	the pas	st 5 yea	ars. I ar	m autho	rizing l	Denve	r Internatio	nal Airı	port,	Airport	Security	, to	

Signature:

years.

Date:

Please list all home addresses during the past 5 years if outside the State of Colorado **Street Address:** From (Date): Until To (Date): City: State: Zip From (Date): **Street Address:** Until To (Date): City: State: Zip **Street Address:** From (Date): Until City: State: Zip To (Date): **Street Address:** From (Date): Until State: Zip To (Date): City: Please list all home addresses during the past 5 years if outside the State of Colorado **Street Address:** From (Date): Until To (Date): City: State: Zip **Street Address:** From (Date): Until To (Date): City: State: Zip **Street Address:** From (Date): Until City: State: Zip To (Date): **Street Address:** From (Date): Until To (Date): State: Zip City: