



DETROIT METROPOLITAN WAYNE COUNTY AIRPORT AIRPORT ID BADGE APPLICATION

SECTION III – APPLICANT CERTIFICATION

Security Responsibility Agreement:

- I will not allow anyone to use my Airport ID Badge.
- I will wear my Airport ID Badge above my waist on my outermost garment at all times when in the Security Sensitive areas.
- I will challenge and report any individual who is not displaying an Airport ID Badge in a Security Sensitive Area and report the incident to Airport Security or Airport Police.
- I will ensure proper closing and locking of any security door or gate I use.
- I will not allow anyone to follow me or my vehicle through any security door or gate.
- I will report the theft or loss of my Airport ID Badge immediately to Airport Security.
- I will immediately report any security violation I witness to Airport Security or Airport Police.

Privacy Act Notice

Authority: 49 U.S.C. §§114, **44936** authorizes the collection of this information.

Purpose: The Department of Homeland Security (DHS) will use the biographical information to conduct a security threat assessment and will forward any fingerprint information to the Federal Bureau of Investigation to conduct a Criminal History Records Check (CHRC) of individuals who are applying for, or who hold, an airport-issued identification media or who are applying to become a Trusted Agent of the airport operator. DHS will also transmit the fingerprints for enrollment into the US-VISIT's Automated Biometrics Identification System (IDENT). If you provide your Social Security Number (SSN), DHS may provide your name and SSN to the Social Security Administration (SSA) to compare that information against SSA's records to ensure the validity of your name and SSN.

Routine Uses: This information may be shared with third parties during the course of a security threat assessment, employment investigation, or adjudication of a waiver or appeal request to the extent necessary to obtain information pertinent to the assessment, investigation, or adjudication of your application or in accordance with the routine uses identified in the Transportation Security Threat Assessment System (T-STAS), DHS/TSA 002.

Disclosure: Furnishing this information (including your SSN) is voluntary; however, if you do not provide your SSN or any other information requested, DHS may be unable to complete your application for identification media.

I understand that any unanswered questions or incomplete information on this application will cause it to be rejected. The information I have provided is true, complete, and correct to the best of my knowledge and belief and is provided in good faith. I understand that knowing and willful false statement can be punished by fine or imprisonment or both. (See Section 1001 of Title 18 if the United States Code). I agree to the taking of fingerprints and the conducting of a Criminal History Records Check. I understand the Airport will suspend the unescorted access privileges of anyone with an outstanding arrest warrant. I have read the above security rules and policies and I understand that failure to comply with any of them is a security violation and will result in an Administrative Penalty.

WCAA will never share, sell, or rent individual personal information with anyone without your advance permission or unless ordered by a court of law. Information submitted to us is only available to employees managing this information for purposes of contacting you or sending you emails for information related to your employment at the Airport.

PRINT NAME: _____ **APPLICANTS SIGNATURE** _____ **Date** _____

NOTE: Badge Applications are held for processing and pick up of badges for **30 days only**. Forms not processed, or badges not picked up within 30 days will be destroyed and re-application will be required

SECTION IV - EMPLOYER SECTION - BADGE ISSUANCE AUTHORIZATION

I understand this application must be completed and reviewed prior to authorizing it. I affirm that all information on this application is correct and that sufficient administrative records are available for inspection by the TSA (Transportation Security Administration) or the Airport Authority and are maintained by my company as a matter of record. I have made my employees aware of the security rules and procedures at DTW and acknowledge responsibility for any TSA fines levied against Detroit Metropolitan Wayne County Airport which are caused by the failure of any of my employees to adhere to the DTW Security Program. I understand that failure to comply with the requirements of this section will result in the termination of my authorizing authority, administrative penalties and possible TSA Civil Penalties. Airport ID Badges must be returned upon request, termination, or when access is no longer required. I will immediately notify the Airport of lost, stolen and/or terminated Airport ID Badges.

AUTHORIZING SIGNATURE

PRINT NAME

DATE

DTW BADGE

OFFICE PHONE #

ADDITIONAL EMPLOYEE CERTIFICATIONS:

Please check the box that applies:

AOA Ramp Driving Certification (Certification is needed to be eligible to drive on the ramp.)

Escort Authority Certification (Certification is needed to be eligible to escort into Security Sensitive Areas. Provide detailed justification below in order to be considered for Escort Authority. Failure to mark this certification and provide proper justification will disqualify applicant for consideration.)

Justification for Escort Authority: _____

Employee Parking: None South Employee Lot North Terminal Employee Lot Both Employee Lots