



Authorized Signatory Form

Company Name

Billing Address: _____

City

State

Zip

Phone

Badging Contact

The individual listed as Badging Contact will be the primary contact for this company and will receive all communications from the RNO Badging Office regarding renewals, billing, audits, violations or any other concern regarding badging.

Name: _____

Email

Phone:

Authorized Signers

The following names and signatures of company representatives are authorized to change access lists and authorize badges. Each has successfully passed a Criminal History Record Check and TSA Security Threat Assessment. Each agrees to complete RNO's Authorized Signatory Training annually.

1. _____
Printed Name Title

Signature

Email

2. _____
Printed Name Title

Signature

Email

3. _____
Printed Name Title

Signature

Email

Company Certification

As an authorized representative of the company named above, I certify that this company is aware that all employees requiring a RNO security access badge must successfully pass a Criminal History Records Check and TSA Security Threat Assessment. I agree that this company will reimburse Reno-Tahoe Airport Authority for any fines levied against it as a result of violations committed by this company, its employees or representatives. I further agree that this company will notify the RNO Badging Office immediately upon a badge holder/company status change (termination, retirement, etc.).

Name

Date

Signature