



Midland International
Air & Space Port

SECURITY AGREEMENT FOR SECURITY IDENTIFICATION BADGES

The following Airport user, _____, hereinafter referred to as "*Company*," is hereby authorized to have Midland International Air & Space Port Security Identification badges issued to its employees for access to the AOA/Secured Areas of the Airport. The authorization of said Airport Security Identification Badges is subject to the following conditions:

1. **AUTHORIZATION PRIOR TO BADGE ISSUANCE**

The Midland International Air & Space Port, in accordance with TSAR Part 1542 requires all Airport Security Identification Badge applicants to undergo a Security Threat Assessment (STA) and any applicant with un-escorted access to the Secured/SIDA areas to undergo a fingerprint based criminal history records check (CHRC). The employee/applicant is also required to attend an Airport Security Training Session prior to the issuance of an Airport Security Identification Badge.

2. **CONTROL OF IDENTIFICATION BADGES**

It is the sole responsibility of the employee to maintain control of the identification badge which was issued to him or her. In the event an employee loses their identification badge, said employee will immediately notify the Airport Operations Control Center (AOCC). In the event an individual's employment is terminated, Company will collect the identification badge from said person, and immediately return it to the AOCC. Failure to comply with these requirements may subject said Company to penalties and/or fines assessed by the Transportation Security Administration (TSA) and the City of Midland. The Department of Airports reserves the right to revoke the identification badge, at any time, for failure to obey the rules and regulations set forth by the Airport Security Program.

3. **OBLIGATIONS OF IDENTIFICATION BADGE HOLDERS**

The Airport Security Identification Badge must be displayed in accordance with the Airport Security Plan by the person to whom it was issued, while located in the Secured Area. The Airport identification badge must be worn at waist level or above so as to be readily visible. Any individual who is not properly displaying an Airport Security Identification Badge should be questioned in a non-threatening manner. Challengers are not expected to place

themselves or others into a dangerous situation and if they believe that making a challenge would do so, a verbal challenge need not be made. Rather, a law enforcement support should be summoned at the moment such danger is perceived. However, when challenge is appropriate, either a verbal questioning or LEO contact must be accomplished. Discretion must be used when summoning law enforcement support to avoid unnecessary police response. Any person who is not properly displaying or cannot produce a valid identification badge will be referred to the Airport Police and the Department of Airports for proper handling.

4. GATE ENTRY

All employees of Company who have been issued an Airport identification badge, and have access through any door or gate into a restricted area, shall ensure that the door or gate through which entry was gained, properly locks and closes prior to departing the area. If a door or gate does not properly lock and close, the employee identifying this condition will immediately notify the AOCC.

5. PENALTIES ASSESSED BY TSA

Pursuant to the Midland International Air & Space Port, Department of Airports' Security Program, it is expressly understood that the Company will reimburse the City of Midland, for any fines levied as a result of violations committed by the Company, its' employees, and/or representatives.

6. TERMINATION OF AUTHORIZATION

Authorization to possess identification badges will be terminated under any of the following conditions:

- A. When Company ceases operations at the Midland International Air & Space Port.
- B. If any of the conditions contained herein are violated in whole or in part.

Required information follows

Note: Illegible/incomplete forms will be rejected.

- **LEGAL AUTHORIZATION**
- **MINIMUM STANDARDS**
- **BILLING AGREEMENT**
- **COMPANY CORRESPONDENCE AND PRIMARY CONTACT INFORMATION**
- **OTHER AUTHORIZED COMPANY SIGNATURES FOR BADGE ISSUANCE**

LEGAL AUTHORIZATION

What is the nature of your business at the Midland International Air & Space Port? If you operate or store an aircraft at MAF please indicate the Hangar and Aircraft Tail #(s).

Are you a current lease holder with the City of Midland Department of Airports?

YES NO

* A current lease holder is someone that has a signed and executed operating agreement with the City of Midland.

** If you checked yes please proceed to the Minimum Standards Section located on the next page

SPONSOR NAME:

i.e. Company Name

SPONSOR SIGNATURE:

i.e. Authorized Signer for sponsor

AREA OF OPERATION:

i.e. North Ramp, South Ramp, East Ramp, Executive Ramp, West Executive Ramp, Terminal

TYPE OF CONTRACT:

i.e. Temporary / Permanent / Sublease / Contractor

EFFECTIVE AND TERMINATION DATES:

MINIMUM STANDARDS

Have you read the Minimum Standards and Requirements as found on www.flymaf.com?

YES NO

Per the Minimum Standards are you a:

Commercial Aeronautical Service YES NO

Non-Commercial Hangar and Aviation Fuel Dispensing Facility YES NO

Specialized Aviation Service Operator YES NO

Does your business meet the Minimum Standards as adopted by the Midland City Council on May 10, 2005 to operate at the Midland International Air & Space Port?

YES NO

WITNESS the following signatures and seals this ____ day of _____, 20__.

BILLING AGREEMENT

ITEM	BILL COMPANY	CHARGE EMPLOYEE
New Badge	<input type="checkbox"/>	<input type="checkbox"/>
Renewal	<input type="checkbox"/>	<input type="checkbox"/>
Lost Badge	<input type="checkbox"/>	<input type="checkbox"/>
Parking 1	<input type="checkbox"/>	<input type="checkbox"/>
Parking 2	<input type="checkbox"/>	<input type="checkbox"/>
Parking 3	<input type="checkbox"/>	<input type="checkbox"/>

*Note: Check the appropriate box for your billing preference.
If you choose not to check any box we will charge the employee.*

MAF BADGING OFFICE USE ONLY	
INITIALS:	DATE:

COMPANY CORRESPONDENCE AND PRIMARY CONTACT INFORMATION

Note: If you or your company has a change in any field listed below, please contact the AOCC as soon as possible to ensure pertinent information reaches the appropriate party.

COMPANY NAME: _____

COMPANY ADDRESS: _____

PHONE NUMBER: _____

MANAGER: _____

PRINTED NAME

SIGNATURE

TITLE: _____

EMAIL ADDRESS: _____

OTHER AUTHORIZED COMPANY SIGNATURES FOR BADGE ISSUANCE (If any):

PRINTED NAME

SIGNATURE

TITLE

PHONE NUMBER

EMAIL ADDRESS

PRINTED NAME

SIGNATURE

TITLE

PHONE NUMBER

EMAIL ADDRESS

PRINTED NAME

SIGNATURE

TITLE

PHONE NUMBER

EMAIL ADDRESS