Airport Identification Cancellation Form

This form must be completed in accordance with Westchester County Airport and TSA Rules and Regulations concerning the accountability of Airport Identification. It is the responsibility of the tenant to ensure that this form is accompanied by each returned Airport Identification card and returned to the ASC or designated airport representative. Lost IDs are also to be reported with this form in addition to immediate notification.

Fill out all applicable areas:

Return / Cancel Date: ______________________________

Employee Name: ________________________________

Company / Location: ______________________________

Reason for cancellation: ________________________________

Identification Card Returned: Y or N Card Number: __________

Access control card retrieved/deactivated (if applicable): Y or N Card Number: __________

Authorized Signer’s Name: ________________________________

Authorized Signer’s Signature: ________________________________

For Security Office Use Only

Cancellation Date: ________________________________ ID Card Received: Y or N
Reissue ID Number: ________________________________ ID Card Destroyed: Y or N
Comments: ________________________________ Cancelled in C-cure: Y or N

Access Keys/Card Received: Y or N
Parking Card Received: Y or N

Authorized Name: ________________________________ Authorized Signature: ________________________________

Version 6 10/25/10