## **Access Level Request**





THIS FORM MUST BE TYPED. PLEASE DO NOT BEND OR FOLD.

EMAIL FORM TO ACCESS.CONTROL@ATL.COM. TURNAROUND TIME IS 48 HOURS.

SECTION 1 - SPONSOR COMPANY INFORMATION			
Company Name		Date	
Authorized Signatory (Primary or Secondary)		Phone Number	
(Sponsoring Company/Tenant) is the sponsor o	(Sponsored Company)	and as such, request	
that the company or employee(s) of that company port facilities for official business only.	be authorized access	s to the following areas of the air-	
Justification:			
Doors with Nomenclature:			
ALL EMPLOYEE ACCESS Duration of Access		Expiration Date	
☐ Yes ☐ No ☐ Permanent ☐	] Temporary		
SECTION 2 - EMPLOYEE INFORMATION			
First Name, Middle Name, Last Name	SIDA Badge Numb	ber Date of Birth	
1.			
2.			
3.			
4.			
5.			
Authorized Signatory Signature		Date	