

[Company Letterhead (required)]

From: [Company Name]
[**Street Address**]
[City, State ZIP Code]

To: City of Atlanta - Department of Aviation
Security Division

[Date]

RE: Authorized Signatory

To whom it may concern:

This letter represents the appointment of [Firstname Lastname] as the
[primary/secondary] authorized signatory for the purpose of security badging of
[Company Name] employees.

If you have any questions or need additional information, please call 404-000-0000.

Sincerely,

[Firstname Lastname]
[**Title**]