

Application to Add Driving Privileges to Existing PDX Security Badge

Card Number _____

Badge Staff Initials _____

Name: _____
Last First Middle

Employer: _____

Badge Number: _____

Driver's License Number: _____ State: _____ Expiration Date: _____

Grey Box to be completed by Authorized Signatory (AS)

Check all that apply

Non-Movement Area Driver **D** _____ AS Initials

Movement Area Driver **M** _____ AS Initials

_____ *Airfield Ops Approved

AS Printed Name: _____

AS Signature: _____

AS Phone Number: _____

Instructions

1. Authorized Signatory (AS) completes form.
2. Call to schedule Driver training 503-460-4537
3. Badge holder must bring completed form with driver's license to training appointment.