

**Yakima Air Terminal-McAllister Field  
Airport Access Media Accountability Record**

Transportation Security Administration and Airport Security Plan regulations require that all air carriers and each airport tenant or other person(s) or agency(ies) who have, in their possession, airport issued identification, keys, or other devices allowing access to the Airport Operations Area (AOA) and/or Security Identification Display Area (SIDA), **immediately** notify the airport when: 1. An individual's access authority has been revoked or limited (termination, change of job function, retirement, conviction of certain felonies, etc.); 2. An individual's access medium has been lost or stolen, or; 3. The air carrier or tenant becomes aware that the access control system or a component of the system has been compromised or threatened through any means. 4. The airport operator is requiring employers, flight schools, and all other entities that sponsor individuals for identification media to inform the Airport Operator immediately when a sponsored individual no longer meets the requirements for work authorization i.e. expire or invalid VISA "Form I-9".

**NOTICE:** Failure to notify the airport immediately, or at least as soon as practical when any of the abovementioned conditions apply can result in civil penalties being imposed by the TSA, FAA and/or airport authority up to \$11,000.

**Instructions:**

- a) If an individual's access authority has changed, complete sections 1 through 12. The person signing the form on line 15 must be of component authority to do so, i.e. Personal manager, division manager, station manager, supervisor, etc.
- b) If an individual's access medium (photo ID, keys or other access devices, etc.) has been lost or stolen, complete sections 1 through 6, section 13, and sign on 15.
- c) If an air carrier or tenant becomes aware that the access control system or a component of the system has been compromised or threatened through any means, complete sections 1, 2, 14 and sign on 15.

**Notifications:**

If any conditions listed above occur, Federal law and the Airport Security Plan requires that the airport be notified IMMEDIATELY if threat or problem (or within 24 hours or next business day). To accomplish this, COMPLETE this form, email, [shelby.barrett@yakimawa.gov](mailto:shelby.barrett@yakimawa.gov) FAX, or mail it to,:

Yakima Air Terminal-McAllister Field  
2406 West Washington Ave, Suite B  
Yakima, WA 98903  
Fax #: (509) 575-6185

call the ASC at the Airport Administration Office with all of the appropriate information at (509)576-6383, or deliver completed form in person to the Airport Administration Office.

1) Name and telephone No. of Employer			( ) - - - - -		
2) Name of Employee:	Last	First	Middle	3) Social Security Number:	
4) Date of change in access authority (d/m/y):		5) ID Expiration Date and Number:		6) Was picture ID:	
				airport issued ( )	
				airport approved ( )	
7) Reason for change:					
( ) Termination of Employment for any cause, i.e., fired, quit, retired, resigned, deceased etc.		( ) Change in job function which no longer requires SIDA access		( ) Other (explain)	
8) Was picture ID confiscated?			9) If airport issued, was picture ID returned to Airport Administration?		
( ) Yes ( ) No ( ) N/A			( ) Yes ( ) No ( ) N/A		
10) Were keys and other access control devices confiscated?			11) Were keys and other access control devices returned to Airport Admin? ( ) Yes ( ) No ( ) N/A		
12) <b>Media /keys confiscated by:</b> (PRINT name and title) (must be person of authority, i.e. Personnel manager, supervisor, etc)					
13) <b>Lost or stolen picture ID, keys or other access devices.</b> Indicate circumstances of loss, items lost or stolen, and any other pertinent information available. Continue additional narrative on back of form if necessary.					
14) Explain nature of compromise or threat to the access control system					
15) Certification: I certify that the information contained herein is true and correct to the best of my knowledge and understand that knowingly making false statements on this form is punishable by law					
Signature		Title		Date	

This side for Airport use only.

<i>Additional Narrative:</i>		
<b>AIRPORT ACTION TAKEN</b>		
<i>Date Received:</i>	<i>Information received via: ( ) Fax ( ) Mail ( ) Hand Delivery ( ) Telephone ( ) Other</i>	<i>Received by:</i>
<i>Detail action taken:</i>		
ID# _____ Returned & Destroyed ____ Yes ____ No,		
<i>If not reason</i> _____		
<i>Initial</i> _____		
Deactivated ID on Badge computer ____ Yes ____ No		
<i>Initial</i> _____		
Update STA ____ Yes ____ No		
<i>Initial</i> _____		
If keys issued were they returned ____ Yes ____ No		
Removed from Key List ____ Yes ____ No		
Key # _____		
<i>Initial</i> _____		
Ped Form Removed _____		
<i>Initial</i> _____		
<i>Certification: I certify that the information contained herein is true and correct to the best of my knowledge and understand that knowingly making false statements on this form is punishable by law.</i>		
_____ <i>Signature</i>	_____ <i>Title</i>	_____ <i>Date</i>