

AIRPORT PASS RETURN/REPLACEMENT REQUEST FORM

Space to be filled in by the Pass Office

Application submission date _____ Protocol no. _____ Pass Office staff: _____

The undersigned _____ Job title/qualification _____

Company/Public Body _____

on (date) _____ at (h) _____

IS RETURNING AP # _____

Belonging to _____

Place and date of birth _____

Company/Public Body _____

For the following reason:

- upon ENAC's request
- after the termination of an employment contract
- after a change in the Employer
- after a change in authorized access areas
- due to its expiry
- after collection
- Other _____

ASKS FOR THE REPLACEMENT OF AP # _____

Belonging to _____

Place and date of birth _____

Company/Public Body _____

For the following reason:

- AP deterioration
- malfunction in the access control system
- damaged AP
- theft/loss (enclose copy of theft or loss claim)
- Other _____

AP replaced on (date) _____ with AP # _____

Stamp and signature of Pass Office _____

Signature for acceptance _____

**IS RETURNING THE REPLACEMENT PASS WITH NO ESCORTING REQUIREMENT WITH A
MAXIMUM VALIDITY OF 24 HOURS**

Issued in favour of _____

Company/Public Body _____

Valid from (h) _____ of (day) _____ to (h) _____ of (day) _____

**IS RETURNING THE AIRPORT PASS WITH ESCORTING REQUIREMENT WITH A MAXIMUM
VALIDITY OF 24 HOURS**

Issued in favour of _____

Company/Public Body _____

Valid from (h) _____ of (day) _____ to (h) _____ of (day) _____

IS RETURNING VEHICLE PASS # _____

For the
vehicle _____

Plate number/VIN _____

Company/Public Body _____

For the following reason:

upon ENAC's request
after the termination of an employment contract
after a change in the Employer
after a change in authorized access areas
due to its expiry
after collection
Other _____

IS RETURNING A 24-HOUR VEHICLE PASS

For the vehicle _____

Plate number/VIN _____

Company/Public Body _____

Valid from (h) _____ of (day) _____ to (h) _____ of (day) _____

Date _____ Signature _____