



Organization Billing Information

Name of Organization: _____

Organization Type: _____

Billing Contact: _____

Billing Address: _____

Contact Phone: _____ Fax: _____

Email: _____

EIN (Tax ID Number) _____

Examples of charges billed to Employers include:

Fingerprinting
New Airport ID
Renewal Airport ID

Employee Key Card
Employee Parking

Examples of charges billed directly to the Employee include:

Lost badge replacement fees
Key Card replacement fees

ID Processing fees (violation)
Re-training fees (violation)

I acknowledge that the Capital Region Airport Commission will bill my organization for services marked above.

Name (Print): _____

Signature: _____ Date: _____

Please return completed form to:

Airport Badging
Office Phone (804) 226-3056/3057 Office Fax (804) 226-3077