

**SCREENING PARTNERSHIP PROGRAM APPLICATION**

**INSTRUCTIONS:** Complete a separate application for each individual airport location. An authorized representative of the airport or the airport owner must complete the application. The application must be completed in full to be considered for approval by TSA. Attach all supporting documentation to the application and use separate sheets if more detail is needed. Please provide a copy of the completed application to the Federal Security Director.

**SECTION I. Airport Information**

Request Date	Airport Name	FAA Identifier
Airport Operating Authority		

**SECTION II. Contact Information**

Authorized Requestor	Position	
Primary Number	Alternate Phone Number	Email Address
Mailing Address	Email Address	

**SECTION III. Required Information**

1. Indicate if the requesting airport authority seeks to provide or may seek to provide the private security screening services at the airport. Airports interested in providing their own private security screening services must submit a proposal (per instructions posted on FedBizOpps.gov) and compete for contract award in accordance with the Competition in Contracting Act and the Federal Acquisition Regulation.

a.  YES

b.  NO

2. Per 49 U.S.C.44920 as amended by the FAA Modernization and Reform Act of 2012 (P.L. 112-95), the airport authority shall provide a recommendation as to which company would best serve the security screening and passenger needs of the airport, along with a statement explaining the basis of the airport operator's recommendation. **NOTE:** *The recommendation provided below is for application purposes only. TSA is under no obligation to contract with the airport operator / authority's recommended vendor.*

a. Airport operator's recommended company. Provide the company name and address.

b. Statement explaining the basis of the operator's recommendation. Additional pages may be attached.

3. Does the airport have any activities planned within the next 18 months, such as major construction or significant volume adjustments that would affect the screening operation?

a.  YES

b.  NO

**Section IV. Optional Information**

4. Provide any additional information you would like TSA to consider during the evaluation of this application. Additional pages may be attached.

**Section V. Signature**

Upon execution of this application, the authorized representative, (specified as the primary point of contact in this document) hereby requests the TSA Administrator to approve this application to have the screening of passengers and property at the airport conducted by a privatized screening company contracted to the TSA, as provided for under Section 44901 of the Aviation and Transportation Security Act, as amended.

TSA will evaluate this application in accordance with the criteria specified in section 44920, as amended, of Title 49, United States Code. If the application is approved, the airport operator understands that any potential contract resulting from the submission of this application will be awarded and administered by TSA in accordance with the Competition in Contracting Act and the Federal Acquisition Regulation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of Execution (*Application Date*)

\_\_\_\_\_  
Print Name

**PAPERWORK REDUCTION ACT BURDEN STATEMENT:** TSA's Screening Partnership Program (SPP) (49 U.S.C. § 44920 (ATSA §108)) enables commercial airports to apply for a private screening company to provide passenger and baggage security screening services. Transportation Security Administration estimates that the average burden for collection is 15 minutes per response. **This collection is required to obtain or retain benefits.** You may submit any comments concerning the accuracy of this burden estimate or any suggestions for reducing the burden to: TSA-11, Attention: PRA 1652-xxxx 601 South 12th Street, Arlington, VA 20598. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The control number assigned to this collection is OMB No. 1652-xxxx, which expires **MM/DD/YYYY**.