| **Category** | **Questions to Answer** |
| --- | --- |
| **Stakeholder Information** | * What is your contact information and do you have the designated authority to apply on behalf of your organization? Reference the corporate resolution, by-law, Aircraft Operator Standard Security Program (AOSSP) etc., that reference this authority. * Does your organization have the legal authority to enter into an agreement with TSA? Reference the authority that confirms this information. |
| **Services Being Requested** | * Provide a description of the activities requiring TSA services. * What is the environment of requested services (airport, seaport)? * What are the targeted days and hours for service requests? * What is the frequency of services (daily, weekly, monthly, seasonal, holidays, etc.)?   What is the projected monthly hours of requested services based on frequency?  How many passengers are expected to be screened (per month and per year)? |
| **Location of Requested Services** | Provide requested services location address and description. |
| **Available Facilities To Perform Requested Services** | * Provide a general description of the current facilities at the location of requested services. |
| **Funding For Requested Services** | * What is the source of funding for requested services? * What is the applicant’s available program budget for the first fiscal year (month and quarter)? |