**Print Name** 

Initials



## **AUTHORIZATION FOR AUTOMATIC BANK CARD PAYMENT PROCESSING**

My signature below authorizes the Metropolitan Airports Commission (MAC) to process payment using the bank card on file for charges or credits related to Transponder access in MAC-owned facilities. No other charges or credits are authorized. This authorization shall continue until canceled in writing.

In the event a payment to this account fails for any reason, the MAC may deactivate my Transponder access. It is my responsibility to inform the MAC if I wish to change the bank card to which payment is made or expiration date of the card changes.

The MAC believes that protecting your privacy is one of our most important responsibilities. The MAC will use the bank card number only to process your payment/credit.

We have severely limited the number of people who have access to this information. We maintain physical, electronic, and procedural safeguards to guard your information. Our employees have been instructed in the importance of maintaining the confidentiality of bank card information. Employees who violate these policies are subject to disciplinary action.

**PRINT CLEARLY** 

Email address

Signature		Date	
	WHITE / FILE	PINK / CUSTOMER	
	METROPOLITANI AII		
		RPORTS COMMISSION ACY NOTICE	
In accordance with the Minnes to inform you of your rights as	sota Government Data Practices they pertain to the private or co	Act, the Metropolitan Airports C nfidential information collected f	Commission ("MAC") is required rom you.
or Commercial vehicles Opera programs, MAC will also collec	itions services at the Minneapoli	is-St. Paul Airport ("Airport"). By as and times that your employee	s or your company vehicles visit
You are not legally required to nformation requested. However Parking or the Commercial Vel	er, it you tail to provide the reque	C is requesting and you may refested data, you will not be allow	use to provide some or all of the ed to participate in the Employe
will be limited to MAC employed legitimate reason for access confidential information withou	to the information you provide. I	ng these services or whose job However, federal and state law ( jury, or state or federal agency.	cion, access to this information responsibilities provide them wit do authorize release of private o if the information is sought with
acknowledge that I have read vill be using the facilities at the	and understand the above infore Airport a copy of this document	mation. In addition, I agree to p t.	rovide all of my employees who
This notice is required when collect as the "Tennessen Warning."	ting private or confidential data from	an individual. Minn. Stat. § 13.04, s	subd. 2. This is also been referred
I have read this information	1		