



Access Badge Application

Contractor/Employee Information			(please print clearly)		
First Name:	Middle Name:	Last Name:			
Date of Birth: (Month, Day, Year)			Gender: (M/F)		
Country of Citizenship:			Country of Birth:		
Passport Number (if applicable):			Passport VISA Category (if applicable):		
Permanent Resident Card Number (if applicable):			Permanent Resident Card Category (if applicable):		
Home Address: (Street Address, City, State & ZIP) "NO PO BOX ADDRESS"			Contact Phone #:		
Company Information					
Company/Department:			Supervisor Name:		
Supervisor Phone #:			Work Phone #:		

Please be sure all information is complete, accurate and legible!

I understand that my information will be submitted to the Department of Homeland Security per its CFATS Personnel Surety Program activities pursuant to section 2102 of the Homeland Security Act of 2002, and section 27.230(a)(12)(iv) of the Chemical Facility Anti-Terrorism Standards (CFATS).

I understand all access badges assigned to me as a Marathon Employee/Contractor are the property of the Michigan Refining Division and subject to unannounced audits. All lost/stolen access badges must be reported to Security immediately.

By signing this form, I agree to these rules and will comply with them as they are enforced by Marathon Petroleum Company LP.

Employee/Contractor Signature: _____ **Date:** _____