

Please return to: Airside Management Unit Old Terminal Cork Airport

I agree to comply with the conditions and duties of an Authorised Signatory for Airside Vehicle Permits as outlined in the 'AMUVP-04 Duties of an Authorised Signatory for Airside Vehicle Permits' document that I have received.

Name (Print):	
Company:	
Signature:	
Date:	

Please provide an e-Mail address to which we may send information relating to Authorised Signatories:

Please note that person(s) acting as an Authorised Signatory are required to return this completed form to the Airside Management Unit at the address above or by e-mail to <u>Caroline.dwyer@daa.ie</u> or <u>eibhlin.mcgrath@daa.ie</u>

Persons who fail to return the completed form shall have their name removed from the list of Authorised Signatories.