



DURHAM COUNTY

AUTHORIZED PERSONNEL BADGE REQUEST

This form is used to request a new or replacement Durham County identification/access badge and should be brought with you when you come to Human Resources for your badge.

First Name _____

Last Name _____

Middle Name _____

Gender _____

Select Affiliation: Employee Contractor/Other

Select Reason: New Badge Replacement Badge

If replacement, indicate reason: Lost Stolen Faded/worn Defective
 Change in appearance

There is a \$10 replacement fee ONLY for lost or stolen badges.

County Department or Business Name _____

Supervisor _____

Supervisor's Contact Number _____

Badge Number (to be filled in by HR) _____

APPROVAL

Required for County Employees

Department Director or Designee Printed Name

Signature

Date

Required for Contractors

County Representative Printed Name

Signature

Date