EXHIBIT <u>D</u> City of Phoenix Aviation Department Sensitive Security Information Acknowledgement Form

The documents entitled [fill in document title(s)] ("Documents") to be used as part of the [fill in project name] contain <u>Sensitive Security Information</u> that is controlled under 49 C.F.R. Parts 15 and 1520. These documents may only be disclosed to persons who have the requisite "need to know", as defined in 49 C.F.R. Parts 15 and 1520. Unauthorized release of this information may result in civil penalty or other action. For U.S. government agencies, public disclosure is governed by 5 U.S.C. 552 and 49 C.F.R. Parts 15 and 1520.

I acknowledge, on my behalf and that of my company, the above statement and agree to destroy the [fill in document title(s)], in compliance with 49 C.F.R. Parts 15 and 1520, upon the earlier of our company's completion of our need to review and/or use the Documents or no later than [fill in current contract end date].

NAME OF COMPANY

AUTHORIZED REPRESENTATIVE PRINTED NAME

AUTHORIZED REPRESENTATIVE'S SIGNATURE

TITLE

PHONE NUMBER

ADDRESS

CITY, STATE AND ZIP CODE