Empower Field at Mile High
Self-Certification Form

The following form must be completed 48 hours prior to arrival and faxed or emailed to the venue. One form must be filled out for each vehicle. Please confirm with the venue’s security representative once submitted to ensure all forms are complete and have been received.

Venue Contact Information

Jared Devine | Director of Security | 720-258-3006 | jared.devine@broncos.nfl.net
Cindy Gordon | Security Manager | 720-258-3161 | cindy.gordon@broncos.nfl.net
24-Hour Security Office | 720-258-3057 | Fax 720-258-3061

Company: __________________________________________________________

As the authorized representative for the above company, I hereby certify this company’s agreement to the terms and conditions of Empower Field at Mile High’s (venue) Self Certification Program.

We agree to meet the standards set forth by the venue and remain in compliance with the established Self Certification Program.

Non-compliance with the terms and conditions set forth may result in withdrawal of this company’s certification by the venue.

The information contained in this and all Self Certification Program documents shall be handled, maintained and secured as confidential.

Company Representative Printed Name: ________________________________

Title: __________________________________________________________________

Mobile Phone: __________________ E-Mail: ________________________________

Secondary Point of Contact Printed Name: ________________________________

Title: __________________________________________________________________

Mobile Phone: __________________ E-Mail: ________________________________
ALL OF THE BELOW INFORMATION IS REQUIRED 48 HOURS PRIOR TO ARRIVAL

Event: ____________________________________ Event Date: ________________

Vehicle Arrival Date: ____________ Vehicle Departure Date: ________________

Vehicle Arrival Time: ______________ Vehicle Departure Time: ________________

Requested Location of Vehicle at Venue: ____________________________________

Purpose of Vehicle: ________________________________________________________

Make: ___________________________________________________________________

Model: __________________________________________________________________

Color: __________________________________________________________________

License Plate (including state): _____________________________________________

WILL VEHICLE BE PULLING A TRAILER?       Yes       No

Make: ___________________________________________________________________

Model: __________________________________________________________________

Color: _________________ License Plate (including state): ______________________

Driver Name: ______________________________________________________________

Driver License # (including state): __________________________________________

Driver Cell Phone: __________________________________________________________

Will vehicle park inside stadium?       Yes       No

If so, on what date will vehicle park inside stadium? ____________________________

Signature of Company Representative and Date: ________________________________