



Customer Identification Acceptance Form

Tender Date: _____ Tender Time: _____

Type of first ID reviewed: _____

Matching Photo on ID? Indicate: Yes No

Type of second ID Reviewed: _____

Matching Photo on ID? Indicate: Yes No

Printed name of individual from whom
the cargo shipment was accepted: _____

Shipper's Company Name
(Where applicable) _____

Name of employee or authorized
representative who verified the I.D.
information: _____

**Note: All areas of the form must be completed. The terms "none" or "N/A"
must be used to indicate omitted information.**

Total Truck Transport acknowledges its responsibility to maintain all required ID information at the local station for a minimum of 30 calendar days from the date the cargo was tendered, and make it available to the TSA upon request.
Unauthorized disclosure of this information is strictly prohibited.

Effective for IACSSP 5A dated May 31, 2011

Sensitive Security Information

WARNING: This record contains Sensitive Security Information that is controlled under 49 CFR parts 15 and 1520. No part of this record may be disclosed to persons without a "need to know", as defined in 49 CFR parts 15 and 1520, except with the written permission of the Administrator of the Transportation Security Administration or the Secretary of Transportation. Unauthorized release 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 CFR parts 15 and 1520.