

# BUILDING ACCESS REQUEST AND SECURITY FORM

Name \_\_\_\_\_  
Employer \_\_\_\_\_  
Billing Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Phone \_\_\_\_\_  
Effective Date \_\_\_\_\_

## CHECK APPLICABLE INFORMATION

### BUILDING ACCESS

- Activate New Device
- Lost Device
- Damaged Device
- Deactivate
- Transfer Device From \_\_\_\_\_

### KEY FOB ACCESS ONLY

- Access to Floor(s) \_\_\_\_\_
- Add Employee to Directory
- Delete Employee from Directory
- Enable After Hours HVAC
- Disable After Hours HVAC
- Other \_\_\_\_\_

### Check One:

- Device Returned with Form (No Charge) – Device # (s) \_\_\_\_\_
- Device Not Returned with Form (\$20 Fee) including lost - Device # (s) \_\_\_\_\_
- Comment Line \_\_\_\_\_

- Requests completed and returned by 1:00 PM will be processed that day and available for pick up after 4:00pm. Forms returned after 1:00 PM will be processed the next business day.
- There is a \$20 non-refundable charge for lost or damaged devices and for termination without returning device.

**AUTHORIZED TENANT SIGNATURE** \_\_\_\_\_

## OFFICE USE ONLY

OFFICE APPROVAL \_\_\_\_\_

**MANAGEMENT** (Initial / Date)  
New Access Card # \_\_\_\_\_  
New Fob Key # \_\_\_\_\_  
Access Level \_\_\_\_\_  
Access Link Level \_\_\_\_\_  
HVAC Code \_\_\_\_\_  
Date Received \_\_\_\_\_  
Date Entered \_\_\_\_\_  
Entered By \_\_\_\_\_  
Directory Added By \_\_\_\_\_

**SECURITY** (Initial / Date)  
Access Card # \_\_\_\_\_  
Fob Key # \_\_\_\_\_  
Access Level \_\_\_\_\_  
Access Link Level \_\_\_\_\_  
HVAC (OCP) \_\_\_\_\_  
Date Received \_\_\_\_\_  
Date Entered \_\_\_\_\_  
Entered By \_\_\_\_\_  
Date Last Used \_\_\_\_\_

- Previous Device Not Returned