

Access Control Card Request Form

Please submit this request to the management office by email to a member of your management team. The access cards assigned to your suite are your responsibility. Broken, lost or stolen keys will be charged a replacement fee of \$10.00 per card.

Building Name:
Tenant Name:
Suite # Phone:
Select One: New Employee Replacement Key
Employee Name:
Email: Phone:
Access Needed:
By requesting 24-hour access card, you are authorized to access the building after- hours and on holidays when the building is locked to the general public.
You acknowledge that building security is the responsibility of card holders and any lost, stolen or terminated employee cards will be reported immediately to the management office for deactivation and reissue where applicable:
Requested and Acknowledged By:
Printed Name:
Date Requested:
For Management Office Use Only:
Card Number: Date Assigned:
Deactivation Requested By:
Reason: Lost Broken Stolen Employee Termination Other: