## **900 WEST HASTINGS**

## CARD ACCESS AUTHORIZATION

SECTION A To be completed by building managem	TION A To be completed by building management	
<ul> <li>New</li> <li>Replacement – <i>old card number</i>:</li></ul>	Card Number: Date Issued: Date Returned:	
Comments/Other Information:		

SECTION B	To be complete	d and signed by <b>employer/authorized rep</b>	presentative of the tenant	
ACCESS CARD/KEY FOB TO BE ISSUED TO:				
Name:				
	surname	first name	initial(s)	
Position/Title:				
Tenant Name:				
<b>TENANT AUTHORIZATION</b> : We hereby request that a building access card for after-hours access to the floor(s) be issued to the above person.				
		Xauthorized signatory		
date		name and position		

## **SECTION C** To be signed by the **employee** upon receipt of the access card/key fob

date

I hereby acknowledge receipt of the access card/key fob (the number on the back of the access card/key fob should match the card number noted above). I agree that I will be solely responsible for this access card/key fob, and that I will not allow anyone else to use my access card/key fob at any time. I will return the access card/key fob to building management upon demand. I understand and agree that if I do not return the access card/key fob upon demand, or if the access card/key fob is lost or stolen, I will be responsible for the cost to replace the access card/key fob of \$20.00. I agree to abide by all rules and regulations relating to after-hours access as set from time to time by building management.

X\_\_\_\_\_ signature