

MASTER AUTHORIZATION FORM

COMPANY NAME: _____ SUITE # _____

I. BILLABLE AUTHORIZATION:

Names of those authorized to request and sign service invoices for billable services (e.g., freight elevator reservations, after-hours air conditioning, engineering services, janitorial services, special cleaning, excessive trash removal, construction order, etc.):

Signature by one of the above persons on a service invoice constitutes AGREEMENT BY _____
to pay for the service(s) provided. (Company Name)

II. KEYS/LOCKS:

Name(s) of those authorized to request and sign forms for key/lock request:

III. ACCESS:

Name(s) of those authorized to request and sign forms for security clearance (e.g., after-hours access, property removal passes, etc, **NOTE: All valid key card holders have authority to sign people into the building.**

IV. KEY CARD ACCESS REQUESTS:

Name(s) of those authorize to request and sign forms for new key cards and/or card changes:

V. EMERGENCY CONTACTS:

Please list below in order of priority the names and home phone number of persons we may contact, at our sole discretion, after hours, in case of emergency:

Please list the number of employees you currently have in your office: _____

The representatives from _____ listed above are authorized to sign for those services as indicated.
Company

Name (Typed)

Signature

Title

Date

Please complete and return to Management