



Building Access Form

ONE Marina Park Drive

(Must be submitted to CBRE 72 Hours in Advance)

ORIGIN OF REQUEST

Tenant
 Vendor / Contractor
 Management Office

Name:		Company / Affiliation:	
Date Received:		Work Phone:	Pager:
Time Received:	AM PM	Cell Phone:	Home Phone:

PURPOSE

Company Name:	Person in charge:	No. of people expected:
Time IN	AM PM	Date IN
Time OUT	AM PM	Date OUT

Description of Activities

FREIGHT ELEVATOR ACCESS

High Rise	YES NO	Operators Name:	Billable: Y or N	Billable to whom:
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Floors Accessed:	Description of use:	Start Time:	AM PM	Finish Time:	AM PM
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Low Rise	YES NO	Operators Name:	Billable: Y or N	Billable to whom:
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Floors Accessed:	Description of use:	Start Time:	AM PM	Finish Time:	AM PM
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Comments:

HVAC or Sprinkler

Company Name:	Authorized Signature:	\$ Rate / Hr.
Date ON	Time ON	AM PM
Date OFF	Time OFF	AM PM

Description of request:

HVAC on Floors:

Sprinkler on Floors:

DISTRIBUTION (circle appropriate)

SECURITY
 TENANT
 CB MANAGEMENT
 MAINTENANCE
 CLEANING

CBRE ACCESS AUTHORIZATION

Signature: _____ Comment: _____

SECURITY USE

Actual Time IN	<u>AM</u>	<u>PM</u>	Actual Time OUT	<u>AM</u>	<u>PM</u>
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Comments:

