



BUILDING ACCESS REQUEST FORM

Return **via email** to carolyn.kessel@hines.com

*****Required for all Deliveries, Vendors and Contractors Access to Carillon*****

Please submit forms 24 hours in advance of access request.

Forms submitted with less than 24 hour notice should be followed up with a phone call.

Please contact the Management Office at 704.714.1100 with any questions.

Tenant	Tenant Contact	Delivery/Work
Name:	Name:	Date:
Suite #:	Phone #:	Time:
Contractor Name:	Contractor Contact	Areas Affected:
Name:	Name:	Suite/Floors #:
	Phone #:	

VENDOR/CONTRACTOR PARKING: The Loading Dock is limited to 30 minute parking for deliveries and pick ups

Scope of Work Being Done:

Special Requests:

Submitted By: _____

(Authorized Tenant Signature)

Date: _____

The below is to be completed by Building Management.

Certificate of Insurance on File YES NO	Security Assistance Required: YES NO	Engineering Assistance Required: YES NO
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Approved By: _____

(Authorized Building Management Signature)

Notes From Management _____