## Access Card Request Form

## Email to: carillon.access@cushwake.com

TENANT:

REQUEST: *(1) New access card (e.g. New employee)
*(2) Replacement (e.g. access card has been damaged, lost or stolen)
(3) Reprogramming of existing access card.
(4) Deactivation (e.g. Cancellation (employee left company)/Termination)

ACCESS:
(A) Building: $24 \times 7$
(B) Office Hours: 8am -5pm M-F
(C) Other - Please Define

FLOORS:

| Name | Existing Access Card \# <br> (if applicable) | $\frac{\text { Request }}{1,2,3 \text { or } 4}$ | $\frac{\text { Access Level }}{A / B / C}$ | Bluetooth <br> Requested | Access Returned |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | - | - | - | - |
|  |  | - | - | - | - |
|  |  | - | - | - | - |
|  |  | - | - | - | - |
|  |  | - | - | - | - |
|  |  | - | - | - | - |
|  |  | - | - | - | - |
|  |  | - | - | - | - |
|  |  | - | - | - | - |
|  |  | - | - | - | - |
|  |  | - | - | - | - |
|  |  | - | - | - | - |
|  |  | - | - | - | - |
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|  |  |  |  |  |  |

## Tenant Representative Signature:

Date:
*Note: A $\$ 15.00$ fee will be charged for new and replacement access cards.
*An additional $\$ 15.00$ fee will be charged for Bluetooth Access.

For Hines Associates Use only
Tenant charge:
Date Issued:

HINES

