WILSHIREGRANDCENTER

VENDOR ACCESS REQUEST FORM

All access forms must be submitted to the Building Management Office before 12:00 noon prior to the day access is needed along with a certificate of insurance. Requests for access into any adjacent suites must be submitted 3 days prior to scheduled work and approved by Building Management.

REQUESTING TENANT:			
GENERAL/SUB CONTRACTOR NAME:			
DAY/DATE(S) O	F ACCESS:		
APPROX. ARRIV	AL TIME:		
APPROX. DEPAR	RTURE TIME:		
SUITE(S)/FLOOI	R(S) TO BE ACCESSED:		
NAME OF INDIVIDUALS FOR ACCESS: 1 2			
3		6	
LOADING DOCK ACCESS:		Before 6:00 AM	After 6:00 PM
FREIGHT ELEVATOR ACCESS:		Reserved:	Access Only:
IF EQUIPMENT/	FURNITURE IS BEING RE	MOVED FROM PREMISES, PLEASI	E FILL OUT BELOW:
<u> zeon manty</u>		MOVED THOM FREMIOLOGY LECTOR	Method of Disposal
Item	Quantity	Vendor/Hauler	(recycled, reused, donated, or landfill)
This portion mu	st be completed by the (Office of the Building prior to gran	ting access:
Insurance Certificate:		Expires:	
AUTHORIZED BY	Initials :		