

# Brookfield Properties

## BAY ADELAIDE CENTRE ACCESS CARD REQUEST FORM

Building: \_\_\_\_\_

Tenant Name: \_\_\_\_\_

Suite Number: \_\_\_\_\_

Authorized By: \_\_\_\_\_

Date: \_\_\_\_\_

Authorized Floors/Areas: \_\_\_\_\_

Authorized Access:  Business Hours Only

Evening

Weekend

Unlimited (24 hours)

Employee Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

Department: \_\_\_\_\_

Office Location: \_\_\_\_\_

Office Telephone #: \_\_\_\_\_

Employee must provide acceptable photo identification to complete application process. Completed forms can be emailed to [BAC.Accesscard@brookfield.com](mailto:BAC.Accesscard@brookfield.com).

No signatures required from previously established tenant email addresses.

### BROOKFIELD USE ONLY

Card Number: \_\_\_\_\_

Date: \_\_\_\_\_

Completed By: \_\_\_\_\_

Cards Received By: \_\_\_\_\_

Date: \_\_\_\_\_