

**AUTHORIZED SIGNATURES FOR WORK DURING
OR AFTER NORMAL OPERATING HOURS**

Required for any work done at Republic Plaza at any time.
Form must be received by Property Management in Suite 3700 by 3:00pm
the day before required admittance M-F, and F for weekend work

TENANT: _____ SUITE: _____ DATE: _____

AUTHORIZED BY: _____ (Print) SIGNATURE: _____ (Must be Authorized Contact) PHONE: _____

NAME OF COMPANY / PERSON(S) TO BE ADMITTED:

DATE: _____ TIME (from-to): _____

DATE: _____ TIME (from-to): _____

DATE: _____ TIME (from-to): _____

(Attach list of additional names if needed)

WORK TYPE TO BE PERFORMED:

Smoke Detectors
Take out of scan: Yes No Floor(s): _____

Odors expected (type)? _____ Ventilation Needed? Yes No

Fire Alarm Testing: Yes No Date: _____ Time: _____ Floors(s): _____

VENDOR INFORMATION:

Work Performance Date(s): _____ Time (from-to): _____

Clearance to the following areas needed: Loading Dock Freight Elevator Other: _____

Security Escort Needed: Yes No Time (from-to): _____

Bill to: GC Tenant Brookfield

(Explanation) _____

Vendor Authorization By: _____ (Print) _____ (Authorized Signature)

DOCK RESERVATION TIMES: 6-9 AM AND 3-6 PM, MONDAY THRU FRIDAY (MUST HAVE RESERVATION)
FIRST COME FIRST SERVED: 9AM – 3PM, MONDAY THRU FRIDAY (½ HOUR PARKING LIMIT)
ALL OTHER TIMES: BY RESERVATION ONLY

NO EXCEPTIONS

To Be Completed by Property Management

COI Approved: _____

Request Received and Approved by: _____

Date of Request: _____ Time: _____

Copies for Engineering, Central Operations, Security, Loading Dock