



## BUILDING ACCESS CARD FORM

Please complete this form and return to Cushman & Wakefield PRIOR to occupancy.

Fax No.: 949-252-1899 OR michelle@2020main.com

Tenant/Company name: \_\_\_\_\_

Suite: \_\_\_\_\_ 2020 Main Street, Irvine, CA 92614

Manager Authorization, Name: \_\_\_\_\_

Manager Authorization, Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Phone Number: \_\_\_\_\_

Office Email: \_\_\_\_\_

1. I understand that I am responsible for the noted access card and the use of that card.
2. I will not give, loan, or trade this access card to anyone.
3. I will not grant access to anyone not known to me.
4. I will report the loss or theft of my card immediately to property management.
5. I will, upon termination of my employment or at the request of property management or security, return the assigned access card.
6. I understand that lost and /or unreturned access card will result in a fee of \$15 dollars (\$15.00) being incurred.
7. I understand that misuse of this card will result in the loss of card access privileges.
8. I have read, understand, and agree to the above.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

Building Management use only:

Processed By: \_\_\_\_\_

Access Card #: \_\_\_\_\_

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

Special Comments: \_\_\_\_\_

\_\_\_\_\_