1455 Lincoln Parkway AUTHORIZED ACTIVITY REPORT

Contractors and Tenants shall complete the following details and return to the Management Office 24 hours prior to request time. All contractors and vendors must provide the management office with a current Certificate of Insurance 24 hours in advance.

> ALL after hours work requires this signed activity report documentation. Please email completed form to: aallonce@parmco.com

Attention (Circle all that apply):

	Property Management	E	ngineerin	g Security
Tenant Informatio	on:			
Tenant Name & Su	uite Number:			
Date of Request: _			Time o	f Request:
Tenant Contact Nu	umber:			
Contractor/Vendo	or Information:			
Contract/Vendor I	Name		_ Phone	e Number:
Description of Wo	rk/Services:			
What day do you i	need access:			Beginning Time of Access:
				Ending Time of Access:
Do you need smol	e detectors disabled?	Yes	No	
Does the Management Office have current Certificate of Insurance on file (this is required before allowing access to contractors/vendors)?				
Tenant Signature	/Date:			
Management App	proval/Date:			
Engineering Appro	oval/Date:			