



100 S.E. 2nd Street, Suite 1900, Miami, FL 33131  
Phone (305) 539-7100 • Fax (305) 539-7078

### Tenant Access Card Request

(Please type or print)

Last name: \_\_\_\_\_

First name: \_\_\_\_\_ MI: \_\_\_\_\_

Company: \_\_\_\_\_ Suite: \_\_\_\_\_

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

Requested hours of access: \_\_\_\_\_

Requested floors to be accessed: \_\_\_\_\_

Is this a replacement card?  Yes  No (Cost for replacement card is \$10.00)

Authorized Tenant Signature: \_\_\_\_\_

\_\_\_\_\_  
Print Name

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

**Please fax the tenant access card request form to management office at 305-539-7078 by 12:00pm on the day that the employee will have their card done. Then at 2:00pm the employee should be present on the 19<sup>th</sup> floor across from the Executive Health Club to acquire their tenant access card.**

---

FOR BUILDING USE ONLY

Card # \_\_\_\_\_ Access Level \_\_\_\_\_

Output Linking Level: \_\_\_\_\_

Programmed by: \_\_\_\_\_ Date Programmed: \_\_\_\_\_

PMO: \_\_\_\_\_

Released to: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Print Name