



**450 North Brand Boulevard
Glendale, CA 91203**

VENDOR ACCESS REQUEST FORM

ACCESS INFORMATION

Date of Access: From: _____ To: _____
Time: Begin: _____ AM/PM End: _____ AM/PM

TENANT INFORMATION

Tenant Company _____ Tenant Representative _____
Tenant Phone _____ Tenant After-Hour Phone _____
Suite / Floor / Area to be Accessed _____

Please Note: Tenant is responsible for granting suite access to vendors/contractors.

VENDOR INFORMATION

Vendor _____ Contact _____ Phone _____
Description of Activity / Contractor Employee Names _____

OTHER SERVICES

Will this work require Building assistance? YES or NO - (Select one)

Describe Request: _____

There may be a charge if above-standard service is requested. Please check with Building Management.

ACCESS TO ELECTRICAL CLOSET	YES or	NO - (Select one) Available Monday – Friday
ACCESS TO TELEPHONE CLOSET	YES or	NO - (Select one) Available Monday – Friday
FREIGHT RESERVATION	YES or	NO - (Select one)
LOADING DOCK ACCESS (20-Minute Loading)	YES or	NO - (Select one) Available Monday – Sunday

INSURANCE VERIFICATION

All vendors and contractors scheduled to perform any work for the Building or within a Tenant Suite are required to provide proof of insurance to Building Management prior to any work commencement. Approval of access forms is subject to confirmation of insurance compliance.

Certificate of Insurance verified by **Management** YES or NO (Not required, no services are being performed)

Building Management Authorization **Date**

Tenant Authorization **Date**

All requests must be received by 4:00PM on the preceding business day. Please email the completed form to Jeff Wong at jeff.wong@cushwake.com or deliver to 450 N. Brand Blvd., Suite 850. For additional information, please call (818) 553-6724.