

EQ Office

APPENDIX "E"

KEY REQUEST FORM

Tenant: _____

Address _____ **Suite:** _____

Qty.	Key	Description of area/door to be accessed	Charge

Please complete, sign, & return to the Property Management office, Fax # (702) 475-3718

Authorized by: _____ Date: _____ Phone: _____
(Tenant Representative)

Delivery Instructions: _____

- **Allow two working days for delivery**

Tested and Issued by: _____ Date: _____

Received by: _____ Date: _____

For Office use only

New key

Duplicate key

Replacement key

Remove from Janitorial key ring: Key # _____



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