EQ Office

APPENDIX "F"

SPECIAL FUNCTION NOTIFICATION

Tenant: _____

Address _____ **Suite:** _____

Type of Function: _____

Date of Function: _____

Hours: From: _____ To: _____

Number of Visitors: _____

Names of Visitors Expected (PLEASE PRINT):

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

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

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

3800 Howard Hughes Parkway
Suite 140
Las Vegas, NV 89169
702-728-5390