



**TENANT AUTHORIZED  
REPRESENTATIVES**

**TENANT NAME:** \_\_\_\_\_ **SUITE:** \_\_\_\_\_

Name(s) of contact(s) during normal business hours (**Including Work Order System**):

NAME: \_\_\_\_\_ Tel. No.: \_\_\_\_\_ E-mail: \_\_\_\_\_

NAME: \_\_\_\_\_ Tel. No.: \_\_\_\_\_ E-mail: \_\_\_\_\_

NAME: \_\_\_\_\_ Tel. No.: \_\_\_\_\_ E-mail: \_\_\_\_\_

The following person(s) is authorized to request, in writing, the issuance, transfer and deletion of security **Access Cards** for employees:

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

The following person(s) is authorized to request, in writing, **Billable Services**, such as Overtime HVAC, Engineer Labor, and other requested services for employees:

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

The following person(s) is authorized to request, in writing, **Lock & Key** request, including granting access to locked suites for employees:

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

TENANT CONTACT \_\_\_\_\_ TITLE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**PLEASE RETURN THIS FORM TO:**

Management Office  
5599 San Felipe, Suite 106, Houston, Texas 77056  
E-mail: admin5599@tanglewoodproperty.com  
Phone: (713) 621-1300 Fax: (713) 621-0218