

## MANDALAY TOWERS 2 & 3 PARKING/BUILDING CARD REQUEST

Please print or	type the following infor	mation:
Employee Name:		
Tenant Name:		
Suite/Department:		
Work Phone Numb	oer:	
Supervisor's Name	::	
Parking Garage:	201/225 Garage	315 Garage
	Building Only	220 Garage
Check One:		
Initial New Card Request		Replace Lost or Broken Card
Reissue Card		Card Number Lost or Returned
Vehicle Informa	tion:	
Vehicle #1 (Must	be filled out completely)	Vehicle #2
Make:	Color:	Make:Color:
Model:	Year:	Model:Year:
License Plate #:	State:	License Plate #:State:
Card Number Iss	ued:	
the parking/access		d within <u>7 days</u> of card activation will result in <b>person having a deactivated card will be</b>
own risk of fire, th deliberately damag	eft or damage to vehicle or c ged or misused parking/acces	The vehicle owner parks their vehicle at his/hontents. There will be a charge for any lost, ss card. R PARKING AT ANY TIME.
Superviso	or Signature	Date