



PEAKVIEW TOWER | ACCESS CARD REQUEST

Name of Company: _____ Date: _____

Individual's Name: _____ Suite/Floor: _____

Access Card Number: _____

Lost Card Number: _____

TYPE OF REQUEST (✓ one)

☐ New Card ☐ Replacement Card (\$16.00 fee) ☐ Deactivate Card ☐ Legal Name Change

TYPE OF ACCESS (✓ all that apply)

☐ Building and Garage

☐ Fitness Center

Locker Room: ☐ Men's ☐ Women's

****Requests for access to the Fitness Center and/or Locker Room must be dropped off to the Management Office with a Fitness Center and Locker Room Release form signed by the Individual. ****

Authorized Building Contact Approval: _____

Phone Number: _____

Please submit the request and attach form into the online tenant request system. For questions, email

adminDTC@am.jll.com

Requests received by 1:00 PM will be completed that day. All others will be completed during the next business day.

Please plan accordingly.

To be completed by the Management Office:

Building Authorization: _____

Request Processed: _____