



Resurgens Plaza

TENANT REQUESTED AFTER HOURS HVAC

_____ requests overtime HVAC for:
BUSINESS NAME

FLOOR/ STE. #	DATE START	DATE STOP	START TIME	STOP TIME	NO. OF HOURS	FOR MANAGEMENT USE
			a.m. p.m.	a.m. p.m.		
			a.m. p.m.	a.m. p.m.		
			a.m. p.m.	a.m. p.m.		
			a.m. p.m.	a.m. p.m.		
			a.m. p.m.	a.m. p.m.		
			a.m. p.m.	a.m. p.m.		

I understand that there will be an hourly charge per floor billed for extra HVAC.

AUTHORIZED TENANT:

TENANT SIGNATURE

DATE

APPROVED BY:

MANAGEMENT REPRESENTATIVE

DATE

IMPORTANT:

To ensure operator/engineer availability to program your requests, deliver this form to the Property Management Office or email vishna.ramotar@transwestern.com

NO LATER THAN 12:00 P.M. the day prior to the request.