



Columbia Square

ELECTRICAL CLOSET / MECHANICAL ROOM ACCESS FORM

This form is designed to provide Property Management with the necessary information to accommodate your request to gain access to abase building electrical closet or mechanical room. Please fill out the form in its entirety and return to the Property Management Office (420 West) no later than 4pm the day before access is required. This form will be reviewed by the appropriate Hines personnel, and you will be notified if any adjustments need to be made. Forms can be sent electronically to Columbiasquaremanagement@hines.com

TENANT INFORMATION

Tenant: _____ Department (if applicable): _____
 Contact: _____ Number(s): _____
In the case that the above cannot be reached, please provide alternate contacts
 Alternate: _____ Number(s): _____
 Alternate: _____ Number(s): _____

CONTRACTOR INFORMATION (if applicable)

Contractor: _____ Supervisor on site: _____
 Contact Number: _____
 Subcontractor: _____ Supervisor on site: _____
 Contact Number: _____

ACCESS INFORMATION

Electrical Closet Mechanical Room

Date of access: _____ Time of Access: _____

Floor and Tower where access is required: _____

Describe reason access is needed:

HINES USE ONLY Engineering / Property Management

	Yes	No	N/A	
Scope reviewed:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering Approval: _____
Impairment Status:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Security Notified:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management Approval: _____
Engineer Needed:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Certificate of Insurance on File:	<input type="checkbox"/>	<input type="checkbox"/>	(required)	

Comments/ Special Direction

Closet / Room Condition _____