

10100 Katy Freeway

ACCESS CARD & PARKING APPLICATION

Company Name _____ Suite(s) _____

Main Phone # _____

Employee Name _____

Employee Email _____

Vehicle Information

Vehicle #1	Vehicle #2	Vehicle #3
Plate # _____	_____	_____
Year _____	_____	_____
Make _____	_____	_____
Model _____	_____	_____
Color _____	_____	_____

Access Card Permissions

- Full Access
- Level(s) _____ only
- Specific Locations/Doors: _____

For Office Use Only

Date Received: _____ Date Delivered: _____

Vehicle #1 Tag: _____

Vehicle #2 Tag: _____

Vehicle #3 Tag: _____

Access Card #: _____

Termination Date: _____

Please drop off or email this form to the Property Management Office at 929 Gessner, Suite 125.