



CENTRAL PACIFIC PLAZA BUILDING ACCESS CARD REQUEST

DATE:		SUITE NO.:
TENANT NAME:		

1. CARD HOLDER INFORMATION

FIRST NAME: _____	LAST NAME: _____
TITLE: _____	PHONE NO.: _____
EMAIL: _____	

2. REQUEST TYPE

Please note that there will be a **\$25.00 (including Hawaii General Excise Tax) non-refundable Activation Fee** billed to your Account for each new card.

Check all that apply:

NEW CARD
 REPLACE DAMAGED/LOST CARD
 RE-ASSIGN
 DE-ACTIVATE
 ADD ACCESS

EFFECTIVE DATE: _____ **EXISTING CARD NO.*:** _____

*Card number is the five digit number (beginning with 0) on the back side of access card

3. ACCESS AREAS

Select all that apply:

EXTERIOR BUILDING DOORS

ACCESS BY FLOOR (please specify)

B
 1
 2
 3
 4
 5
 6
 7
 8
 9
 10
 11
 12
 13
 14
 15
 16
 17
 18
 19
 20
 21
 22

PARKING - *please complete and submit a Monthly Parking Agreement with this form.*

OTHER _____

4. TENANT AUTHORIZED PERSON

Please notify Building Management at (808) 521-6022 immediately if there are any changes or to report any Lost, damaged, or stolen cards.

SIGNATURE:		
PRINT NAME & TITLE:		
EMAIL:		
CONTACT NO.:		

BUILDING MANAGEMENT USE ONLY - Please do not mark this area

AMOUNT DUE (plus GET):		
PROCESSED BY:		DATE:
ISSUED ACCESS CARD NO.:		ACTIVATION DATE: