

LBTC Client Slide Card/Key Request

(A new request form must be completed for initial and each additional key request from company.)

Company Name: _____

Company Representative: _____

Phone: _____ Email _____

Location(s):

Building _____ Room(s) _____

Names of Key-Holders

	Building Key/Card	Suite Key	Both
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I, the undersigned, take responsibility for the above listed Key-Holders, and have communicated to them that they are not to make copies or lend keys/cards to others.

Client Signature (name, title) _____ Date _____