**Brookfield**

California Market Center
110 E. Ninth St, Ste C681
Los Angeles, CA 90079

Management (213) 630-3600
Security (213) 630-3700

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# Vendor Access Request

Tenant Name & Suite #: _____ Company / Vendor Name: _____

Tenant Contact Person: _____ Primary Contact / Phone: _____

Access To Floor(s): _____ Date & Time (Start/End): _____

Freight Elevator(Lg/Sm): _____ Freight Reservation (Start/End): _____

**Reservation of a freight elevator requires an operator and will be charged per standard billing rates.*

**Type of work being performed / Special Instructions**

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**Support Services Required** (Please indicate time and dates)

Sprinkler Valve Shutdown: _____ Roof Access: _____

Fire Alarm Control: _____ Mechanical Room Access: _____

Hot Work Permit: _____ Electrical Room Access: _____

Building Engineer: _____ Telephone Closet Access: _____

Building Security: _____ Special Cleaning: _____

**Note: Noise generating work will be completed off hours (6:00 pm- 6:00 am)**

Tenant or Approved Signature: _____ Date: _____

**For Brookfield Use Only**

Brookfield Comments: _____

_____

Insurance on file: Yes: _____ No: _____

Approved By: _____ Security _____ Engineering _____ Management

Valid COI must be on file with management office, requirements available upon request
Remit to Brookfield Management 24 hours in advance