

KEY REQUEST FORM

Please use this form to request new or replacement keys to your Suite or Mail Room/Box (if applicable) for your employees or sub-tenants. This form is to be filled out only by the Employer or Master Lessee authorized to assign keys to individuals.

PROPERTY (Select One): **Below cost is for replacement/additional keys only – for re-keying get estimate.**

____ Leamington \$10.00 each
____ Financial Center Building \$10.00 each

Name of Person Authorizing Keys (please print): _____

Company/Tenant Name: _____ **Suite Number:** _____

Indicate type and quantity of each key below:

| | | | |
|-------------------|-------|---|-------|
| FRONT DOOR | _____ | <u>MAIL BOX ACCESS (Leamington Only):</u> | |
| INTER-OFFICE DOOR | _____ | MAIL ROOM DOOR | _____ |
| REST ROOM DOOR | _____ | MAIL BOX DOOR | _____ |
| OTHER | _____ | Mail Box #: | _____ |

**TOTAL KEYS
REQUESTED:** _____

Signature of person named above: _____ **Date:** _____

Please return the completed form to:

Portfolio Property Investors
Attn: Property Manager
1814 Franklin Street, Suite 600
Oakland, CA 94612

Fax: (510) 839-2104
Email: john@ppi-ltd.com

Please allow 48 business hours to process your request, thank you.

For Office Use Only

\$_____ will be billed to the above tenant or paid in advance.

| | |
|--------------------------|---------------------------|
| <input type="checkbox"/> | Bill Tenant |
| <input type="checkbox"/> | Advanced Payment Required |