REQUEST FORM: INDIVIDUAL SECURITY ACCESS PASS



To obtain a security access pass to Lot Fourteen this form must be completed in full and submitted by the organisation's tenant administrator to LotFourteenSecurity (lotfourteensecuritycoordinator@agsecurity.com.au).

Each access pass will provide the owner access to all shared spaces across the precinct as well as their specific tenancy and applicable access requirements.

Once prepared, Lot Fourteen Security will email the tenant administrator and access pass owner to advise them that the pass is ready for collection/activation from the Lot Fourteen Security Office, which is located in the basement of TechCentral.

To activate a pass the owner must show proof of identity. All new security access passes will be provided via the Gallagher phone application unless specified in the comments section below.

CREDENTIAL HOLDI	ER INFORMATION		
Prefix:		First name:	
(Ms, Mrs, Dr etc.)			
Last name:		Post nominal:	
		(OAM etc.)	
Position title:			
Organisation:			
Email:			
Mobile phone:			
'			
Please select the description that best describes the			
individual	•		
BUILDING ACCESS AND LOCATION REQUIREMENTS			
Primary location:			
Building name:		Building floor:	
J		5	
Secondary location (if applicable):			
Building name:		Building floor:	
J		0	
ACCESS REQUIREM	IENTS:		
Date to be activated/collected from security:			
Date to be deactiva	ted (if applicable):		
Select which access pass type is requested:		Physical card	Mobile app credential
Special access requirements or comments			
e.g. tenant requires	a physical access card,		
	r offices or rooms etc.		
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