

To: CBRE, Inc.  
(Please fax prior to 3:00 p.m. @ 503.886.2676)

Date: \_\_\_\_\_

Requestor Name: \_\_\_\_\_

Tenant Name: \_\_\_\_\_

Floor/Location: \_\_\_\_\_

Please enter the date(s) and time(s) you are requesting HVAC

Date: \_\_\_\_\_ From: \_\_\_\_\_ am / pm

To: \_\_\_\_\_ am / pm

Date: \_\_\_\_\_ From: \_\_\_\_\_ am / pm

To: \_\_\_\_\_ am / pm

Date: \_\_\_\_\_ From: \_\_\_\_\_ am / pm

To: \_\_\_\_\_ am / pm

Comments: \_\_\_\_\_

I hereby authorize overtime HVAC as outlined above:

**Authorized Tenant Signature:**

\_\_\_\_\_  
(Signature)

