

Submitted By: \_\_\_\_\_  
Date: \_\_\_\_\_

Approved By: \_\_\_\_\_  
Date: \_\_\_\_\_



## OFFICE BUILDINGS - OVERTIME HVAC REQUEST FORM

The overtime HVAC Request Form should be used when HVAC is needed before 8:00 a.m. and after 8:00 p.m. weekdays, before 9:00 a.m. and after 4:00 p.m. on Saturdays, or any time on Sunday or building holidays. All Overtime HVAC Requests must be received by the Property Management office no later than 4:00 p.m. for after-hours on weekdays, weekends and building holidays. Request not received by the Property Management Office by 4:00 p.m. may be subject to an additional 4-hour labor fee.

**Today's Date:** \_\_\_\_\_

**Tenant:** \_\_\_\_\_

**Person requesting:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

<b>Please Check One:</b> <input type="checkbox"/> One Time Request <input type="checkbox"/> Permanent Request	
<b>Date(s) A/C Needed:</b> _____	
<b>Time ON:</b> _____	<b>Time OFF:</b> _____
<b>Floor:</b> _____ <input type="checkbox"/> West <input type="checkbox"/> East	<b>Floor:</b> _____ <input type="checkbox"/> West <input type="checkbox"/> East
<b>Floor:</b> _____ <input type="checkbox"/> West <input type="checkbox"/> East	<b>Floor:</b> _____ <input type="checkbox"/> West <input type="checkbox"/> East
<b>Floor:</b> _____ <input type="checkbox"/> West <input type="checkbox"/> East	<b>Floor:</b> _____ <input type="checkbox"/> West <input type="checkbox"/> East
<b>Additional Information</b> _____	
_____	

**Authorized Tenant Signature:** \_\_\_\_\_

<b>For Office Use Only:</b>		
<b>Received by Security After Hours:</b> _____		
<b>Date:</b> _____	<b>Time:</b> _____	<b>Engineer on Call</b> _____
<b>A/C Request Completed by Hines:</b> _____		
<b>Date:</b> _____	<b>Time:</b> _____	<b>WO #</b> _____