

PMG-31A

EDITION: APRIL 12, 2019
PHONE: (813) 974-2845

## Building Access Continuation Request for Construction

TEMPORARY <u>USF-ID CARD</u> BUILDING ACCESS FOR <u>CONTRACTORS</u> AND <u>CONSULTANTS</u>.

EMAIL COMPLETED FORM TO FM-OPERATIONS TECHNOLOGY: hpagan@usf.edu

FM-OPERATIONS TECHNOLOGY WILL NOTIFY THE CONTRACTOR DIRECTLY WHEN THE BUILDING ACCESS IS GRANTED.

For Use:	☐ CONSTRUCTION ACCESS (RENOVATION OF OCC	UPIED BUILDING)  DATE:
SELECT 🗸	□ POST OCCUPANCY (PUNCHLIST COMPLETION / V	Varranty Phase)
Building:		ROOM (s):
DURATION:	☐ THIS SUBMISSION IS FOR CHANGE IN DATE/TIM	E
	☐ THIS SUBMISSION IS FOR ADDING A BUILDING	
	DESIRED ISSUE DATE/TIME:	ANTICIPATED RETURN DATE/TIME:
A. REQUE Date: Jame:	STOR INFORMATION: (USF-PM)	DEPARTMENT: PHONE:
USF ID:	<u>.</u>	EMAIL:
DATE:	OR INFORMATION: (REQUIRED FOR OCCUPIED BUILDING O	DEPARTMENT:
NAME:		Phone:
JSF ID:		EMAIL:
	NG MANAGER: Sponsor is Building Manager: [	
JSF ID: C. BUILDII DATE:	NG MANAGER: SPONSOR IS BUILDING MANAGER: C	YES (IF YES, LEAVE THIS SECTION BLANK)  DEPARTMENT:
C. Buildii	NG MANAGER: SPONSOR IS BUILDING MANAGER: [	YES (IF YES, LEAVE THIS SECTION BLANK)
C. BUILDII	NG MANAGER: SPONSOR IS BUILDING MANAGER: C	YES (IF YES, LEAVE THIS SECTION BLANK) DEPARTMENT:
C. BUILDII DATE: NAME: JSF ID:		Tes (IF Yes, Leave this section blank)  Department: Phone: Email:
C. BUILDII DATE: NAME: JSF ID:	NG MANAGER: SPONSOR IS BUILDING MANAGER: C ACTOR INFORMATION:	YES (IF YES, LEAVE THIS SECTION BLANK)  DEPARTMENT: PHONE: EMAIL:  E. DISTRIBUTION/NOTIFICATION:
C. BUILDII DATE: NAME: JSF ID: D. CONTR		TYES (IF YES, LEAVE THIS SECTION BLANK)  DEPARTMENT: PHONE: EMAIL:  E. DISTRIBUTION/NOTIFICATION:
C. BUILDII DATE: NAME: JSF ID: D. CONTR	ACTOR INFORMATION:	Yes (IF YES, LEAVE THIS SECTION BLANK)  DEPARTMENT: PHONE: EMAIL:  E. DISTRIBUTION/NOTIFICATION: USF-IT: IT-Security@usf.edu
C. BUILDII DATE: NAME: JSF ID: D. CONTR NAME: FIRM:	ACTOR INFORMATION:	YES (IF YES, LEAVE THIS SECTION BLANK)  DEPARTMENT: PHONE: EMAIL:  E. DISTRIBUTION/NOTIFICATION: USF-IT: IT-Security@usf.edu V FM-OPS: hpagan@usf.edu
C. BUILDII DATE: NAME: JSF ID: D. CONTR NAME: FIRM: NET ID NAME	ACTOR INFORMATION:	YES (IF YES, LEAVE THIS SECTION BLANK)  DEPARTMENT: PHONE: EMAIL:  E. DISTRIBUTION/NOTIFICATION:  □ USF-IT: IT-Security@usf.edu  ▼ FM-OPS: hpagan@usf.edu  □ BLDG. MAN.

- \* CAMPUS SERVICE CONTRACTORS UNDER CURRENT CONTRACT WITH USF MAY RETAIN THE NETID NAME AND USF-ID CARD; AND REACTIVATE BUILDING ACCESS FOR CONSTRUCTION PHASE DURATION OF ACTIVE PROJECTS USING THIS FORM.
- \*\* PLEASE PROCESS SEPARATE BUILDING ACCESS REQUEST FORM FOR EACH BUILDING TO BE ACCESSED.
- FOR **CHANGE IN DATE/TIME** (E.G.: TIME EXTENSIONS DUE TO DELAY), THE APPROVED FORM CAN BE REISSUED WITH NEW DATE/TIME AND THE BOX LABELED THIS SUBMISSION IS FOR **CHANGE IN DATE/TIME** CHECKED.