

## Angus Work Order System Customer Authorization Form

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

Company Name: \_\_\_\_\_

Suite # \_\_\_\_\_ Main Phone Number: \_\_\_\_\_

**Please list the name and e-mail address of individuals who are authorized to request services. The person(s) listed as Service Requestors shall be authorized to incur charges on behalf of the tenant for all building services. At least one person needs to be an Administrator for your office. Being an Administrator for your office gives you the capabilities of adding and deleting authorized users.**

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

Job Title: \_\_\_\_\_

Email Address: \_\_\_\_\_

Direct Phone #: \_\_\_\_\_ Administrator Rights:  YES  No

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

Job Title: \_\_\_\_\_

Email Address: \_\_\_\_\_

Direct Phone #: \_\_\_\_\_ Administrator Rights:  YES  No

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

Job Title: \_\_\_\_\_

Email Address: \_\_\_\_\_

Direct Phone #: \_\_\_\_\_ Administrator Rights:  YES  No

Email completed form to Valarie Lester @ [Valarie.Lester@pgn.com](mailto:Valarie.Lester@pgn.com)