

1166 ALBERNI STREET



ELEVATOR BOOKING

24 HOURS NOTICE IS REQUIRED

Please email (service@petersonbc.com), fax (604.688.3245) or deliver the completed form to **PETERSON COMMERCIAL**.

Date: _____

Tenant Name: _____ Suite #: _____

Requested By: _____ Phone Number: _____

Email Address: _____

From (Time): _____ To (Time): _____

(Note: No moving during building opening hours Monday to Friday)

Freight Elevator Booked In Advance: YES _____ NO _____

Elevator Padded: YES _____ NO _____

Elevator Padded: YES _____ NO _____

Name of Moving Co.: _____

Contact Name at Moving Co.: _____

Cell: _____

(Note: Bookings outside of regular building hours will require additional security.)

Security Booked: YES _____ NO _____ N/A _____

Security Booking Confirmed? YES _____ NO _____ N/A _____

Notes / Special Instructions: _____

Tenant Authorization:

(authorized signature)

(print name & title)