

FAIRMONT MEDICAL BUILDING



AFTER HOURS AIR CONDITIONING & LIGHTING

24 HOURS NOTICE IS REQUIRED

Please email (service@petersonbc.com) or fax (604.688-3245).

Date: _____

Tenant Name: _____ Suite #: _____

Requested By: _____ Phone Number: _____

Email Address: _____

We will require after hours air-conditioning and/or lighting on the following date(s):

AIR CONDITIONING AND/OR LIGHTING?	DATE	FLOOR	TIME ON	TIME OFF
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Notes / Special Instructions: _____

AFTER HOURS AIR CONDITIONING WILL BE BILLED AT \$50.00 PER HOUR (subject to change).
AFTER HOURS LIGHTING WILL BE BILLED AT \$1.50 PER HOUR (subject to change).

Tenant Authorization:

(authorized signature)

(print name & title)