

## **AFTER HOURS LIGHTING & AIR CONDITIONING**

Form CT-07

## 1901 Avenue of the Stars

To request after-hours air-conditioning and/or lighting (in suites with new lighting systems only), please complete this form, have an authorized person sign it and submit it to the Office of the Building at least one business day/24-hours prior to date of request.

Tenant Name:			Contact Phone #:			
Suite No.:				Date:	Date:	
er-hours lighting	ere is an hourly charge . Hourly charges are sul			(2 hour minimum)	and \$4.00 per hour	
Day of Wee		Start Time	End Time	Lights and	A/C Lights Only	
Day of Wee	N Date(3)	otart rime	Liid Time			
w your charges w	e billed in accordance with be calculated, please di Signature:	scuss them with u	ctices for the requeste s before submitting thi	ed services. If you h s form.	ave any questions ab	
Tenant Authorized Person:	Type/print name & title:					
	Please rememi	ber to inform us p	promptly if there are	any changes.		
		BUILDING MANA	AGEMENT USE ONLY	1		
Amount due:	\$			TLA #	<b>#</b> :	
Signature:						