

**Bank of America Center
OVERTIME AIR CONDITIONING REQUEST FORM**



Tenant: _____

Dept: _____

Date Requested: _____

Time Requested: _____

Person Requesting: _____

Charge Code: _____

Requestor Contact Number: _____

(FIRST)

Date of A/C Needed: _____

Day of Week: _____

Time on: AM or PM _____

Time off: AM or PM _____

Floor: _____

(SECOND)

Date of A/C Needed: _____

Day of Week: _____

Time on: AM or PM _____

Time off: AM or PM _____

Floor: _____

CHECK ONE:

____NORTH HALF ____SOUTH HALF ____FULL FLOOR

CHECK ONE:

____NORTH HALF ____SOUTH HALF ____FULL FLOOR

PLEASE READ THE INFORMATION LISTED BELOW BEFORE COMPLETING THIS FORM

IF NOT SURE WHICH HALF IS NEEDED PLEASE CONTACT THE MANAGEMENT OFFICE AT 713-224-0181.

SHOULD A PROBLEM OCCUR DURING REQUESTED HOURS, PLEASE IMMEDIATELY CALL 713-224-4044. PLEASE USE ONE (1) REQUEST FOR EACH DAY YOU ARE REQUESTING.

ALL REQUESTS FOR OVERTIME AIR MUST BE SUBMITTED TO THE MANAGEMENT OFFICE (IN PERSON OR ELECTRONICALLY) NO LATER THAN **3:00PM**, MONDAY THRU FRIDAY. REQUESTS FOR WEEKEND OVERTIME AIR MUST ALSO BE SUBMITTED BY FRIDAY NO LATER THAN **3:00PM**.

NOTE: ANY REQUESTS TURNED IN AFTER THE REQUIRED DEADLINE WILL BE SUBJECT TO A SERVICE CHARGE. DO NOT REQUEST OVERTIME AIR THAT HAS ALREADY BEEN REQUESTED OR IS STANDING OVERTIME AIR. ANY REQUESTS WITH OVERLAPPING TIMES WILL BE SUBJECT TO A HANDLING FEE OF \$12.50 PER REQUEST.

Authorized Tenant Signature: _____

MANAGEMENT OFFICE USE ONLY

A/C Request Completed by: _____

Unit (s) Put on Line to Provide Service: _____

Total Overtime HVAC Hours: _____

Service Charge: _____