

Access card request form, BMC

Date	
Time period	
Cost centre (<i>kostnadsställe</i>)	
House and floor	
Section and/or group	
Access to room	
First name	
Surname	
Personal identity number <small>(year/month/date and four digit number)</small>	
E-mail	
Phone number	
Mobile number	
Room number	
Signature of responsible/delegated	
Printed name	

Receipt

I have been informed about the directions for access to BMC and hereby acknowledge the receipt of card and code. The card is strictly personal and may not be lent out or given to anyone else. I have also been informed that my use of the card in the passage system is registered (logged) and with my signature, I accept this.

Signature: _____