

University of Miami
Information Technology Security & Control
Physical Security Access Request Form

Incomplete forms will not be processed

Name: _____ Date: ____ / ____ / ____
Title: _____ Room No: _____
UM ID Number: _____ - _____ - _____ Telephone Ext: _____

Ungar Building First Floor

*Γ - Annex Front Door
Γ - Annex Back Door
Γ - Computer Room
Γ - Dispatch
Γ - Break Room
Γ - Room 103 Front
Γ - Room 103 Back
Γ - Room 114 Testing*

Ungar Building Third Floor

*Γ - Room 311 Micro Training
Γ - Room 341 Testing Center
Γ - Dutch Door Testing Center
Γ - Room 302 Micro Group
Γ - Room 304 Product Center*

Merrick Building

*Γ - 5th Floor
Γ - 6th Floor
Γ - 7th Floor*

Ungar Building Second Floor

*Γ - Double Doors
Γ - Development Svcs.
Γ - Hallway Area
Γ - Room 216 Telecom.*

Ungar Building Fifth Floor

Γ - Room 521 Telecom

Pentland Building

*Γ - 1st Floor Telecom.
Γ - 1st Floor Telecom. Storage*

Centrex Building

*Γ - Reception
Γ - Conference room
Γ - Switch Room*

Access Times: Γ - _____ to _____ Γ - 24 Hours Γ - Holiday Access

Circle days: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Managers Signature: _____ **Telephone Ext:** _____

***User Agreement:** You have been issued key/s and or a Proximity access card for entry to restricted areas. Notify Security & Control immediately if they are lost, stolen or misplaced. You are responsible for the key/s and Proximity access card. The cost for replacement of these items is as follows: Regular key \$5.00, Primus key \$15.00, Proximity card \$15.00*

Recipient Signature: _____ **Date:** ____ / ____ / ____

DO NOT WRITE BELOW THIS LINE

Key Number: _____ **Comments:** _____

Processed: _____ **Date:** ____ / ____ / ____