



Appointed Authorized Contact
 Physical Plant Building
 1801 W 31st Street, Cedar Falls, Iowa 50614-0189

Use this form to appoint a person in your department to authorize building access. The appointee can be responsible for requesting and removing card access, making building schedule change requests and reporting system problems. This form must be approved/signed by your Dean, Director, or Department Head. Because we must have an original signature, we are not able to accept this form electronically.

Department Name	Dean, Director, Department Head
-----------------	---------------------------------

Appointed Authorized Contact

Name Printed	UNI ID	Start Date	End Date
Phone	Mailing Address		
E-Mail			
Signature			

I hereby authorize the above individual to approve building access requests

Name (print or type)	Signature (Dean, Director, Dept Head)	Date
----------------------	---------------------------------------	------