

Centerside

**ACCESS CARD REQUEST FORM**

**\*\*NEW & REPLACEMENT ACCESS CARDS - \$15.00\*\***

PLEASE ALLOW A 24 HOUR WINDOW FOR ACTIVATION

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Building & Suite

\_\_\_\_\_  
Phone

**REQUEST**

Issue New Card \_\_\_\_\_  
Floor Access (floors of building to which person needs access)

Delete Card \_\_\_\_\_  
Current Card Number

Reassign Card \_\_\_\_\_  
Card # and name of existing card holder

Authorized by \_\_\_\_\_ Date \_\_\_\_\_

**Return completed form to:**  
Irvine Company Office Properties  
1020 Camino del Rio N., Suite 10200 | San Diego, CA 92108 | [centerside@irvinecompany.com](mailto:centerside@irvinecompany.com)

**CUSTOMER RESOURCE CENTER USE ONLY**

Card Number \_\_\_\_\_

Entered By \_\_\_\_\_

Entry Date \_\_\_\_\_