Building Access Transactions Report Request

An Agency Head or a designee that is on file with DGS shall complete this form to request a report for an individual employee of that agency. This form should be submitted to the DGS Parking Services and Building Access Section.

PART 1: REQUESTOR'S INFORMATION		
Agency Name:		Agency Number:
Requestor Name:		Phone:
Fax:	Email:	
Cost Code:	Billing Address:	
Billing Instructions:		
PART 2: INFORMATION REQUESTED		
Please download access card data for the following employee for the time period(s) indicated. If requesting data from the most recent 45-day period, there will not be a charge. Requests beyond this 45-day window will be charged \$70 for each calendar month that data is requested. Data is limited to the most recent 12 months. Name of Person that Data is Requested:		
Access Card Number:		
Time Period Requested:		
Most recent 45 days of data (free)		
Additional data (\$70 for each calendar month that data is requested) Time Period(s):		
By providing your signature below you agree your agency is responsible for the charges incurred by this request.		
Signature of Agency Head or Designee (Designees must be on file with DGS)	:	Date:
		DGS-32-009 (04/11)