

# Access card request BMC

Date	
Time Period	
Cost center	
House and floor	
Section and group	
Rooms	
First name	
Surname	
Personal identity number Year/month/date, four digit no	
E-mail	
Mobil phone	
Room number	
Signature of responsible or delegated person	
Printed name	

## Receipt

I have understood the directions for access to BMC. I have received the access card and code. The card is strictly personal and must not be lent to or given to anyone else. I have also been informed that using the card in the passage system is registered (logged) and with my signature I accept this.

Signature: \_\_\_\_\_