



FACILITIES DEPARTMENT  
Division of Finance  
& Administration

## ADDITION OR REVISION OF AUTHORIZER

**UNT Facilities**  
Access Control Office - Sycamore Hall  
307 S. Avenue B, Suite 006

Phone: (940) 565-4888  
access.control @unt.edu

Requester's Name:

Date:

Department:

Dept. Phone #:

Select Appropriate Box:  Add  Delete  Revise

No data will be revised to the Access Control Database until this form is received and approved by the Associate Vice President for Facilities.

### CHANGES TO AUTHORIZER'S FILE

Please list changes to Authorizer's file in sections below.

Authorizer's Last Name:

Authorizer's First Name:

Authorizer's Phone Number:

Buildings:

Rooms:

Buildings:

Rooms:

### Additional Information

List any additional information needed to process this request below.

### APPROVAL

Obtain the appropriate signatures below and forward this form to the Access Control Office

\_\_\_\_\_  
Requester's Signature (See Policy 11.005 Paragraph 3):

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

Date:

\_\_\_\_\_  
Associate Vice President of Facilities Signature:

Approved  Denied

Date: