

## Instructions in Absence : Access Authorisations

Please complete and return to the Superintendent. This information will be used by the reception desk staff to authorize access to your apartment as per your instructions.

Apartment N° : \_\_\_\_\_

Date : \_\_\_\_\_

Name(s) of Occupier(s)	1	
	2	

**The following people should be given access to my/our apartment in my/our absence :**

Name	Authorised from (date or leave blank)	Authorised until (date or leave blank)

This form was completed by (name) : \_\_\_\_\_ on (date) : \_\_\_\_\_

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

*To avoid any inconvenience to yourself and your guests, staff and contractors,  
please ensure the list held by the reception staff is kept up to date.*