

**MELVIN MARK COMPANIES**  
**HVAC EXTENSION REQUEST AND AUTHORIZATION FORM**

Please submit this HVAC Extension Request and Authorization to the Building Engineer at least one day in advance.

Building _____	Suite _____
Tenant Name _____	Phone: _____

	<u>Sunday</u>	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>
Date:	_____	_____	_____	_____	_____	_____	_____
Start:	_____	_____	_____	_____	_____	_____	_____
Stop:	_____	_____	_____	_____	_____	_____	_____

	<u>Sunday</u>	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>
Date:	_____	_____	_____	_____	_____	_____	_____
Start:	_____	_____	_____	_____	_____	_____	_____
Stop:	_____	_____	_____	_____	_____	_____	_____

	<u>Sunday</u>	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>
Date:	_____	_____	_____	_____	_____	_____	_____
Start:	_____	_____	_____	_____	_____	_____	_____
Stop:	_____	_____	_____	_____	_____	_____	_____

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Date:	_____	_____	_____	_____	_____	_____	_____
Start:	_____	_____	_____	_____	_____	_____	_____
Stop:	_____	_____	_____	_____	_____	_____	_____

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Date:	_____	_____	_____	_____	_____	_____	_____
Start:	_____	_____	_____	_____	_____	_____	_____
Stop:	_____	_____	_____	_____	_____	_____	_____

Total Extra HVAC Hours: \_\_\_\_\_

Hourly Rate: \_\_\_\_\_

Cost of Extra HVAC: \_\_\_\_\_

HVAC Extension as indicated above authorized by:

_____ Authorized by (signature)	_____ Title
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_____ Please print name	_____ Date
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