

Gate Pass No. _____

FJR-PX2000-12 R02 Gate Pass Form

GATE PASS

TO:	GUARD ON DUTY	DATE:		Original	Admin Office
FROM:				Photocopy	Security Guard
BUILDING & UNIT NO. / VILLAGE, PHASE, BLOCK & LOT NO.:				Photocopy	Unit Owner/Tenant

Please allow the bearer of this form to pull out bring in the items listed below:

Item No.	Item Description <i>(indicate Serial Number, if any)</i>	Unit	Quantity	Remarks
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Please use additional sheet(s) if necessary.

Requested by:

For leased units:

Authorized by:

Printed Name and Signature of
Unit Owner/ Resident /Tenant

Printed Name and Signature of
Unit Owner/Authorized Representative

Approved:

Printed Name and Signature of
Building/Village Manager

To be filled-out by Guard on Duty:

Date of Exit / Entry: _____

Time: _____

I have certified that I have inspected the items listed above.

Printed name and signature of
Guard on Duty

Note: This also covers the Household Helps Gate Pass.

Note to Guard: Please return signed form to the Property Management Office