

OVERTIME AIR CONDITIONING REQUEST FORM

Date: _____

Tenant Name: _____

Location Address: _____ Suite #: _____

Contacts Name/Phone #: _____ Fax #: _____

Email: acharles@ipc.com and ldodd@ipc.com(24-hour notice required)

Please complete the information below and return it to the emails or fax number above.

Dates Requested

Hours Requested (2 Hour Minimum Increments)	
From: _____ am/pm	From: _____ am/pm
From: _____ am/pm	From: _____ am/pm
From: _____ am/pm	From: _____ am/pm
From: _____ am/pm	From: _____ am/pm
From: _____ am/pm	From: _____ am/pm
From: _____ am/pm	From: _____ am/pm
From: _____ am/pm	From: _____ am/pm

Overtime air conditioning charge per hour (2 hour minimum increments) per hour

Air Conditioning & Heating are provided from 7:00 am to 6:00 pm Monday - Friday (except holidays) and 8:00 am to 1:00 pm on Saturday. Request for Overtime Air Conditioning or Heating must be submitted **in writing at least 24 hours in advance on days of business** in order to allow the scheduling of equipment by our Engineering Staff.

Authorized & Approved by: _____

<i>For Office Use Only:</i>		
By: _____	Date: _____	Time: _____
Tenant Invoiced: \$ _____	_____	_____
Amount	Date	