

The BROADWAY HOLLYWOOD

GUEST AUTHORIZATION FORM

Unit #: _____

Please print clearly:

Owner Name(s): _____

As owner of the above referenced unit(s), I hereby authorize Management to grant access to the following individuals, based on the criteria indicated. This authorization shall remain in effect until revoked in writing, or superseded in writing.

Guests with unlimited access privileges (enter the full names of guests to be granted unlimited access unannounced 24 hours per day upon presentation of valid identification)

Name	Relationship	Phone Number

Guests with limited access privileges (enter full names of guests, service provider or service companies to be granted access only between the hours of 7:00 A.M. and 6:00 P.M.)

Name	Relationship	Day/Time expected

OWNER SIGNATURE

DATE