



Instructions: This form is to be used for building access for employees and vendors/contractors. In addition, please complete this form when requesting a visitor badge for the department. If this is for a new employee, please submit this information prior to the employee's start date.

- 1. A Director or Chief should complete the employee/contractor/vendor information and sign this form.
2. If there are special instructions or additional information that should be made known, provide this in the Comments section.
3. Check the Badge Type.
4. Check the block next to where the access is needed, along with the Access Level and Access Type.
5. Check the type of door key, if any, the employee needs.
6. Submit form to the Security Officer located in Customer Service.
7. Prior to an employee's first day of employment, email Building Services ORCSecurity@ci.hamilton.oh.us
8. Questions? Contact the Building Security Officer at 785-7314 or email at ORCSecurity@ci.hamilton.oh.us.

Employee/Contractor Name/Vendor Title Credentials for Current Job Function
Department/Company Name Supervisor's Approval / Date
Requesting Director's Signature / Date Signature of Individual Assigning Badge or Key / Date

Comments or Special Instructions

City of Hamilton Municipal Building

Table with 3 columns: Badge Type (New, Replacement, Change), Access Level Key (L1, L2, L3), and Access Type Key (P, T).

Main table with 4 columns: Floor, Access Level, Access Type, and Director's Initials. Lists various departments and their access options.

<input type="checkbox"/> LL – Former Communications Center	<input type="checkbox"/> L1 <input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> LL – Former Emergency Operations Center	<input type="checkbox"/> L1 <input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	

Access to Municipal Garage Complex		
<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Change	L1 – Level 1: 5 Days, 7 a.m. – 3 p.m. L2 - Level 2: 7 Days, 6 a.m. – 6 p.m. L3 - Level 3: 24 / 7 (specify reason below)	P - Permanent T – Temporary (include date)

Door/Gate	Access Level	Access Type	Director's Initials
<input type="checkbox"/> ALL GARAGE ACCESS		<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Administrative Offices (A420, A430B)	<input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Conf. Rm. Elec. G&W (A310, A600A, A600B)	<input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Conf. Rm. Public Works (A500B)	<input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Public Works Foreman Rm. (A510) & Pole Barn (A100)	<input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Employee Parking Lot Gate (G-006)	<input type="checkbox"/> L1 <input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> SW Gate (G-01), SE Gate (G-02), Fleet Per. East (E-04)	<input type="checkbox"/> L1 <input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Overhead Door Garage SW Entrance (OH-05)	<input type="checkbox"/> L1 <input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Gas & Water Office, Workshop (B130, B150, C130, E05)	<input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Troubleshooter's Office (B170A, E-08)	<input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Electric Meter Shop Office (B190A, E-B191)	<input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Fleet Overhead Doors & Per. East (OH-6,7,8, E-04)	<input type="checkbox"/> L1 <input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Fleet Maintenance Storage (C100A)	<input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Per. Doors North, South, & West (E-01,02,03,07,09)	<input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Future Truck Wash (E-06)	<input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Annex Storeroom (Ax-A100, A100A)	<input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Annex Signal Shop & Sign Shop (Ax-B120A, B120B)	<input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Annex Overhead Door South Entrance (OH-Ax-02)	<input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	

Building	Access Level	Access Type	Director's Initials
<input type="checkbox"/> Fire Headquarters	<input type="checkbox"/> L1 <input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Police Headquarters	<input type="checkbox"/> L1 <input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Water Plant – North	<input type="checkbox"/> L1 <input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Water Plant - South	<input type="checkbox"/> L1 <input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	
<input type="checkbox"/> Water Reclamation	<input type="checkbox"/> L1 <input type="checkbox"/> L2 <input type="checkbox"/> L3	<input type="checkbox"/> P <input type="checkbox"/> T: Expiration Date _____	

Door Keys
<input type="checkbox"/> City Master – Operates key locks in the Hamilton Municipal Bldg offices only.
<input type="checkbox"/> Floor Master – Operates key locks on a specific Hamilton Municipal Bldg floor.
<input type="checkbox"/> Single Door – Operates a key lock for a specific Hamilton Municipal Bldg door. Bldg Services Use Only: Key #: _____
<input type="checkbox"/> Other:

Notes: