



CREATING AN ACCESS REQUEST

[FOR AUTHORIZED ACCESS REQUESTERS]

Asset Essentials

Save Cancel

SELECT REGION/SITE

Site: * Access Requests

BE SURE THE SITE IS SET TO ACCESS REQUESTS

ACCESSOR INFORMATION

Please enter the information of the person requiring access.

Accessor Name: * Magnus Viking CSU ID: * 1234567

Email: * m.viking@csuohio.edu Phone: * 216-687-2000

Campus Department: * Athletics Campus Status: * Staff

Access Request Type: * New Key & Electronic Card Hours Needing Access: * 24-Hours

Account Billing Number (PeopleSoft): * 1234-1234-1234-12

BE AS SPECIFIC AS POSSIBLE TO ENSURE PROPER ROUTING AND PROGRAMMING

LIST ROOM NUMBER(S) AND OTHER REQUESTS:

Work requested: * **B / U**

Key for office - Plant Services 230
Card access for - Exterior of Plant Services, 2nd floor stairwell door, and PS 243