



Authorization Form

The UV&S Client Authorization Form is created for your protection. It is necessary that the code number assigned to you on this form be kept confidential. UV&S personnel are required to honor all requests with a valid code number. By signing the form, the Authorizing Agent hereby certifies that the authorized employee may perform all functions checked.

Select the UV&S site this access applies to. If applies to multiple UV&S sites, select all that apply:

- Hutchinson
 Kansas City
 Louisville
 Oklahoma City
 Topeka
 Wichita

All fields must be completed to be valid.

Authorization Code #

(to be completed by UV&S personnel)

Date _____

Authorized Employee Name (Please print) _____

Employee's Signature _____

Department/Cost Center (if applicable) _____

Company _____

Mailing Address _____

Shipping Address _____

City, State, Zip _____

Phone # _____ Ext # _____ Fax # _____

Email Address _____

Security Privileges: Must be completed to be valid. Check all areas that apply.

- Access to records
 Request destruction of records
 Authorize personnel
 Access to all Departments
 Other (Please be specific) _____

I hereby certify that the above individual may perform all functions checked.

Authorizing Agent (please print) _____

Authorizing Agent Signature _____

Internet Email Request

Because of the lack of control over the Internet, UV&S can not guarantee same day shipment of any request received via the Internet.