

# Property Removal Pass

**Company:** \_\_\_\_\_

**Employee Removing Property:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Time of Removal:** \_\_\_\_\_

**Description of Property being removed:**

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\_\_\_\_\_  
*Tenant Contact Authorized Signature*

**Security Officer Use Only**

Date: \_\_\_\_\_

Time: \_\_\_\_\_

\_\_\_\_\_  
*Security Signature*