BGSU
ALARM USER CHANGE REQUEST

Employee Printed Name _________________________________   Staff ID# ______________________
Building/Room # ___________ Department ___________ Phone # 2-______   Email ___________

Please check one:
_____ I have an existing code.
_____ I do not have a code and request that one be assigned to me.

I Request Access to (or deleted from) the following Area(s):
AREA 1: ___Add _____ Delete ________________________________________
AREA 2: ___Add _____ Delete ________________________________________
AREA 3: ___Add _____ Delete ________________________________________
Special instructions: ______________________________________________________________________________________

Please print and obtain authorized signatures:
Employee Signature_______________________________________ Date ____________________
Print Name of Authorized Person ________________________________________________________________
Authorized Signature____________________________________ Date ____________________

Please scan the completed form and then email to facilities@bgsu.edu

For Office Use Only:
Campus Ops: Received Date _________ Code _________ Post to Database __________
Email form to gateway@habitecsecurity.com   CC: agabel@bgsu.edu   Completed By _______ Date _________
If new Code: Email requestor that Code is ready for pick up at the Campus Operations Help Desk.

Habitec: Received Date _________ Acct # _______ Location _______ Area # ____ Area Name ________

SECURITY  FIRE  ACCESS CONTROL  CCTV
Profile ____   Profile Name ______________Arm/Disarm Areas _______ User # _________
Email requestor when active ____Completed Date _________ Habitec Rep Name ______________________
Send completed form to facilities@bgsu.edu
WB/DLH 12/27/13, Rev. 8/26/15 mn, REV 1/30/23 jaa