



AUTHORIZATION FORM

COMPANY:

DATE:

Please specify the required change below:

- New Client
- Existing Client, mention Account Code _____

Choose action required on existing authorized users:

- Add Additional Authorized Users (N)
- Replace all existing Authorized Users (R)
- Revoke Access (A)

Important Notice!

Iron Mountain undertakes extreme measures when it comes to Information Security and Confidentiality Management of client’s material. To ensure maximum security of the records entrusted to Iron Mountain, Iron Mountain personnel will strictly adhere to the following rules without **EXCEPTION**. Please do not ask them to deviate from established procedures.

Please fill in the below tables:

A. List of Authorized Users per Department:

#	Contact Name	Department/Sub Department	Contact Number	Email	Type of Action	InfoOrder* (Check Access Level Table)
1					<input type="radio"/> N <input type="radio"/> R <input type="radio"/> A	<input type="radio"/> L-1 <input type="radio"/> L-2 <input type="radio"/> L-3 <input type="radio"/> L-4
2					<input type="radio"/> N <input type="radio"/> R <input type="radio"/> A	<input type="radio"/> L-1 <input type="radio"/> L-2 <input type="radio"/> L-3 <input type="radio"/> L-4
3					<input type="radio"/> N <input type="radio"/> R <input type="radio"/> A	<input type="radio"/> L-1 <input type="radio"/> L-2 <input type="radio"/> L-3 <input type="radio"/> L-4
4					<input type="radio"/> N <input type="radio"/> R	<input type="radio"/> L-1 <input type="radio"/> L-2 <input type="radio"/> L-3 <input type="radio"/> L-4



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					<input type="radio"/> A	
5					<input type="radio"/> N <input type="radio"/> R <input type="radio"/> A	<input type="radio"/> L-1 <input type="radio"/> L-2 <input type="radio"/> L-3 <input type="radio"/> L-4

Please replicate this page for additional user listings.

*O'Neil Order Access Levels			
LEVEL	SEARCH	ADD/EDIT	REQUEST
L-1	✓	✓	✓
L-2	✓	✓	
L-3	✓		✓
L-4	✓		

B. Invoices & Other Financial Communication to Be Sent to:

No	Name	Contact Number	Email	Signature
1				
2				
3				

UNDERTAKING

I have read and understood the Iron Mountain's company requirement with regards to accessing stored material by the authorized list of users mentioned above. The list will be enrolled by Iron Mountain personnel into the Records Management system. Only authorized users in the list shall carry out other services provided by Iron Mountain which are listed in the Agreement.

Name		Signature
Designation		
Company Name		Company Seal/Stamp