

Authorisation Form

Access Form
Iron Mountain Customer Service
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Date:		Name of applicant:	
Customer Number:		E-mail of applicant:	
Customer Name:		Phone Number of applicant:	
Division ID*:			
Class ID*:			

*If you are granting access to all divisions/classes please leave this field empty. If you intend to grant access only to certain divisions/classes please list them here.

Please give the personal data of those persons who will have access to the stored Articles according to the criteria defined hereinabove. If you have previously granted access to authorised persons, and you did not request the deletion of the access rights of such persons, the current authorisation form shall be supplemented with the following persons.

	Name of Authorised User	Phone Number	E-mail	Destruction*	Signing	Password**
1				Yes / No		
2				Yes / No		
3				Yes / No		
4				Yes / No		
5				Yes / No		

* If you intend to grant access for the user to order the destruction of stored Articles (including both placing the order and confirming the preliminary destruction protocol), please tick 'Yes', otherwise please tick 'No'. If you order collection and destruction from your facility (billing codes 3530 or 4461), Iron Mountain accepts such orders from anyone (not only from the authorised users listed herein).

** It is not obligatory to choose a password. The password may contain 10 characters maximum.

Authorised by: _____

Signing: _____

COMPANY SEAL

Filled by Iron Mountain

SafeKeeperPLUS refreshed by:		Date:
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Disclaimer

All changes in the access rights of the authorised users must be reported to Iron Mountain forthwith. Iron Mountain is not responsible for Customer's failure in doing so. Iron Mountain reserves the right to grant access to the Articles only after this form is filled and duly signed/signed by an authorised user.