

		<b>GATE PASS</b> CN: _____	
		Date :	
Name of Authorized Carrier:		Signature of Carrier:	
Company Name:		Nature of Transaction: <input type="checkbox"/> Pull Out <input type="checkbox"/> Delivery	
	<b>SPECIFICATIONS</b>		
Quantity/Unit	Item Description (describe item in detail)		Remarks
<b>PURPOSE</b>			
<b>Approved by Owner/Tenant</b>		<b>Inspected by Guard-On-Duty</b>	
Name :		Name :	
Unit No.:		Signature	
Date:		Date :	
Signature :		Time :	
		Valid up to	

Accomplish this form in two (2) copies: (1) Tenant's Copy (2) Property Management Office Copy

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