

Tenant

Authorized Person: Signature:

Type/print name & title:

## SIGNAGE REQUEST FORM

Form CT-03

## **Westwood Place**

To order signage for your suite in the Building, please complete this form, have an authorized person sign it and return it to the Office of the Building.

Tenant Name:		Contact Phone #:	
Suite No.:		Date:	
	all copy <u>carefully</u> , as we cannot be responsible for errors. If yors, including punctuation and spaces.	ou are not sure, please c	onfirm with us the
GLASS PLAQUE			
Please print or typ	pe exact copy		Suite No.:
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ELECTRONIC LOBBY DIRECTORY			
Please print or typ	pe exact copy	Phone No.:	Suite No.:
If you need more sp	pace, please add additional copies of this form.		
Your account will be applicable on third us before submitting	e billed in accordance with our standard practices for the requeste party charges. If you have any questions about how your charges g this form.	d services, including an a s will be calculated, pleas	administrative fee as se discuss them with

If you have any questions, please contact the Office of the Building:
Phone: 310-474-2144 Fax: 310-474-8590 Email: <a href="westwoodpl@douglasemmett.com">westwoodpl@douglasemmett.com</a>
10866 Wilshire Boulevard, Suite 270, Los Angeles, CA 90024