



Record Storage & Management
 Off-Site Data Protection
 Secure Shredding
 Document Imaging Solutions

SECURITY AUTHORIZATION FORM

Company Name: _____

Account Number: _____

Primary Contact: _____

Secondary Contact: _____

Access Levels:

G – Global – Full authorization to all services including destruction

L – Limited – Authorized to request services including pick-up or delivery, but not including destruction authorization

NAME	ACCESS LEVEL	TITLE	PHONE

 Authorized Signature, Title

 Date