Heating, Ventilation and Air Conditioning (HVAC)

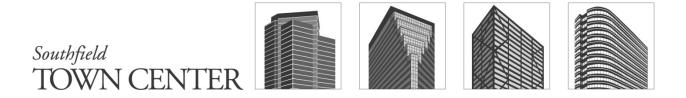
Heating, Ventilation and Air Conditioning (HVAC) is provided Monday through Friday from 6:00 a.m. to 6:00 p.m. and from 8:00 a.m. to 2:00 p.m. on Saturdays. No heating or cooling is provided after regular business hours, on Sundays or on holidays. During most times of the year, the building remains comfortable for tenant use and occupancy after the HVAC system is shut down.

After-hours HVAC is available for a fee upon request. A copy of the After-Hours HVAC Request Form is available below. This form must be completed and returned by 3:00 p.m. on the day you need service, or by 3:00 p.m. on Friday for weekend service. The Request may be dropped off at the Security Desk, Management Office, 3000 Town Center, Suite 2500, 248.350.2222 or via email SouthfieldTC@Transwestern.com.

Charges for this service are as follows:\*

May 1 through September 30	October 1 through April 30
Air Conditioning: \$70.00 per	Heating: \$35.00 per hour
hour	
Fan Only: \$15.00 per hour	

\*Prices are subject to change.



## AFTER HOURS HVAC REQUEST FORM

	Today's Date:
Date(s) for HVAC request:	
Location for After Hours HVAC:	
Company Name:	Building:Suite:
Billing Address:	
I AM AWARE OF THE CHARGES FOR AFTER HOUR AGREE TO THE CHARGES STATED BELOW.	S HEATING/COOLING. I UNDERSTAND AND
PLEASE CHECK ONE:	
MAY 1 – SEPTEMBER 30	OCTOBER 1 – APRIL 30
{ } FAN ONLY – \$15.00 PER HOUR	{ } HEATING/VENTILATION – \$35.00 PER HOUR
{ } AIR CONDITIONING – \$70.00 PER HOUR	\$55.00 FER HOOK
START TIME:	OFF TIME:
AUTHORIZED SIGNATURE:	
REQUESTS FOR AFTER HOURS VENTILATION OR AL ON THE DATE YOU ARE IN NEED OF SERVICE OR BY NORMAL HOURS OF HVAC OPERATION ARE AS FOL • MON. – FRI. 6:00 AM • SATURDAY 8:00 AM • SUNDAY NO HVAC	Y <u>3:00 PM</u> ON FRIDAY FOR WEEKEND SERVICE. LOWS: - 6:00 PM - 2:00 PM
Modification of Request: To be changed and completed b	y Authorized person
Change of time for service requested: Time change from	to
Change of request from Fan, Air Conditioning or Heating to:	Fan AC Heating
Approved by: Position:	Co. or Vendor:
Engineering:	
Request for After Hour HVAC completed according to the ap	pproved request.
By: Time: Date:	
Report all abnormal conditions to Lead Engineer.	Rev. 10.22.15