



# Authorization Form

The UV&S Client Authorization Form is created for your protection. It is necessary that the code number assigned to you on this form be kept confidential. UV&S personnel are required to honor all requests with a valid code number. By signing the form, the Authorizing Agent hereby certifies that the authorized employee may perform all functions checked.

Select the UV&S site this access applies to. If applies to multiple UV&S sites, select all that apply:

- Hays  Hutchinson  Kansas City  Louisville  Manhattan  
 Oklahoma City  Topeka  Wichita

**All fields must be completed to be valid.**

Authorization Code #  (to be completed by UV&S personnel)

Date \_\_\_\_\_ Title (please pick one):  Mr  Ms

Authorized Employee Name (Please print) \_\_\_\_\_

Employee's Signature \_\_\_\_\_

Job Title \_\_\_\_\_

Department/Cost Center (if applicable) \_\_\_\_\_

Company \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Ext # \_\_\_\_\_ Fax # \_\_\_\_\_

Email Address \_\_\_\_\_

UV&S will periodically send out notifications and marketing information by e-mail. If you would like to OPT Out of receiving these mailings, please check here.

**Security Privileges: Must be completed to be valid. Check all areas that apply.**

- Access to records  Request destruction of records  Authorize personnel  
 Access to all Departments  
 Other (Please be specific) \_\_\_\_\_

I hereby certify that the above individual may perform all functions checked.

Authorizing Agent (please print) \_\_\_\_\_

Authorizing Agent Signature \_\_\_\_\_

## Internet Email Request

**Because of the lack of control over the Internet, UV&S can not guarantee same day shipment of any request received via the Internet.**