



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 _____
(signature must be a handwritten signature unless an e-Signature Software Consent form is on file with UV&S)

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 _____
(signature must be a handwritten signature unless an e-Signature Software Consent form is on file with UV&S)

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.