



444 South Flower Street Los Angeles, California 90071

REMOVAL PERMIT

This permit must be presented to the security officer on duty

Number of Boxes _____

Describe Contents _____

Type of Machines _____

Make of Machines _____

Serial Numbers _____

Other _____

Issued To _____

Company _____

Authorized Signature _____ Authorized Tenant Name _____

Suite Number _____ Name Telephone _____

Security Officer _____ Number Post _____

Date _____ Time _____

Please make three copies (Security, Person Removing Property, Tenant)