SIGNAGE REQUEST FORM

**Form CT-03 Bishop Square**

*To order signage for your suite in the building, please complete this form, have an authorized person sign it and return it to the Office of the Building.*

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| **Tenant Name:** |  | **Tower:** ASB Pauahi |
| **Suite No.:** |  | **Date:** |
| **Email:** |  | **Phone #:** |

***Please proofread all copy carefully, as we cannot be responsible for errors.*** *If you are not sure, please confirm with us the maximum characters, including punctuation, spaces and suite numbers.*

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| **DOOR PLAQUE** | |
| **Please print or type exact copy** *(Max 20 characters and spaces per line, up to 4 lines of copy)* | **Suite No.:** |
|  |  |
| **FLOOR DIRECTORY** | |
| **Please print or type exact copy** *(Max 25 characters and spaces)* | **Suite No.:** |
|  |  |
| **FIXED BOARD LOBBY DIRECTORY** | |
| **Please print or type EXACT COPY** *(Max 34 characters including suite number. Directory strips are all CAPS)* | **Suite No.:** |
|  |  |

Your account will be billed in accordance with our standard practices for the requested services, including an administrative fee as applicable on third party charges. If you have any questions about how your charges will be calculated, please discuss them with us before submitting this form.

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| --- | --- | --- |
| **Tenant Authorized Person:** | Signature: |  |
| Type/print name & title: |  |

If you have any questions, please contact the Office of the Building:

Phone: 808-545-7500 **~** Fax: 808-523-6008 **~** Email: [bishopsquare@douglasemmett.com](mailto:bishopsquare@douglasemmett.com) 1001 Bishop Street, Suite 750, Honolulu, HI 96813

**Revised 01/24**