Colocation Key Card Issuance Acknowledgement and Agreement



1. Access Card: Initial Replacement* * Existing Access Card #:							
2. Applicant Information:							
Is Applicant a U.S. Citizen? Yes No <> If No, list Alien Registration numbe	r here:						
Applicant is a: Colocator Employee Approved Uniti Vendor Colocator Restricted Vendor							
If vendor, provide name of Uniti sponsor:							
Applicant Name: (Last)	Applicant Name: (First, MI)						
Date of Birth:	Place of Birth:						
Applicant Phone #:	Applicant Email						
Manager Name: Manager Email:			l:				
Manager Phone #: 24 Hour Contact Phone #:							
Company Name:							
Company Address: (Street)		City:	State	Zip:			
3. Has the prospective Access Card/I.D. Holder:				Yes	No	Date	
1. Been convicted of a felony within seven years prior to background investigation?							
2. Been convicted of a felony since the background investigation date?							
3. Been employed by Uniti Fiber, or former entities now known as Uniti Fiber? (If yes, also answer 3a below)							
3a Terminated for cause?							
4. Worked as a contractor or contractor employee on the premises of Uniti Fiber, or former entities now known as Uniti Fiber?							
5. Been removed for cause from the premises of Uniti Fiber, or former entities now known as Uniti Fiber?							
4. Supporting Information and Certification (Background information required for Initial Application):							
Background investigation performed by:				Date:			
Authorized Representative Name: Authorized Representative Title:							
Authorized Representative Phone #: Authorized Representative Phone #:			epresentative Email:				
Authorized Representative's Signature:				Date:			

5. Colocator Mailing Address (Must be the business address of the approved Secure Colocator Point of Contact):				
Attention:	Company:	Phone:	Email:	
Address:	City:	State:	Zip:	

6. Send Completed Applications & Photograph to Uniti Fiber:		
Email: ufcolo@uniti.com		
Headshot Photo: Please provide headshot with solid color background. No hats or sunglasses.		

7. Uniti Fiber Reviews & Approvals (Uniti Fiber use only):				
Name:			Badge Number:	Date:
UF Colo Team Review:	Approved	Rejected	Attach explanation if rejected	
	If Rejected:			

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I acknowledge as a Uniti Fiber customer/colocator/vendor, I have been issued and am in receipt of one (1) HID Systems Door Key Card for use as long as I remain in good standing with Uniti Fiber.

I understand that the card is only for my authorized access the Uniti Fiber Colocation Facility and using the card in a manner other than intended may result in damage for which I will be responsible.

I agree to return the card upon expiration of our Colocation Agreements.

I understand and agree that I will be responsible for the cost associated with replacing the card if lost or rendered unusable due to my negligence.

I understand that the replacement cost for this card is thirty-five dollars (\$35.00).

I understand that I will have a photo on file at Uniti Fiber associated with the card I am issued. I am aware that the Colocation Facility is monitored 24/7 via video camera.

Card issued to:	(Print)
Card issued to:	(Signed) Date: