

CROWN

INFORMATION MANAGEMENT

FAX REQUEST FOR SERVICE

800 294 3801

Page 1

Today's Date ____/____/____

Company Name _____

Requestor's Name _____

Account Number _____

Phone Number _____

All Rush Retrievals must be placed by phone, or placed through your company's internet portal.

All Information on page 1 & 2 of this request must be completed in order to be processed. For questions call 800 979 9545

Please Check the appropriate service.

____ Pick Up—Return To Storage

____ Pick Up—New Storage

____ Next Day Retrieval & Delivery

____ Bar Code Labels Needed (number of labels needed) _____

____ New Storage Boxes Needed (number of new boxes needed) _____

Please Continue on Page 2

CROWN

INFORMATION MANAGEMENT

FAX REQUEST FOR SERVICE

Page 2
863 294 3801

Today's Date ____/____/____

Company Name _____ Requestor's Name _____

List Below the Bar Code Number & at least three (3) Reference Field Identifiers for each of the Boxes or Files Requested.

Box or File Bar Code	Reference Field 1	Reference Field 2	Reference Field 3	Additional Info

Both page 1 & 2 of this request must be completed & submitted for an order to be processed.