



Complete all fields below and obtain all required signatures; needed for processing.

Employee (First/Last Name) and Title:

Department: Employee ID#:

Telephone: Office#:

Key Request type: Office(s) (report each room):

Cabinet/furniture/equipment (report lock #s):

Reissue (provide explanation and proof of \$5 payment made to Business Office)

Explanation of key request:

Signatures required for processing (include date signed):

Department Head:

Business Operations:

Chief Engineer:

Key Issue Agreement (signature required): For loan of key(s), I agree to **1)** not loan/share with anyone **2)** not make any attempts to alter/reproduce **3)** use for authorized purposes only **4)** safeguard and store appropriately **5)** immediately report any lost/stolen key(s) to the Safety & Security department by completing an Incident Report **6)** surrender the key upon official request to Safety & Security **7)** pay \$5 for the loss of key dispatched **8)** complete a Master Key form if applicable separate from this Standard Key form.

OFFICE USE ONLY

Key Issue

Issued by (name and date):

Blind Code: Entered by:

Signature Receipt: