



**REQUEST FOR KEYS OR  
CHANGE IN KEY RECORD**

Submit a separate request per person

Please Print or Type Form Completely

Fax completed forms to 786-6989

**Request for (check one)**

New key(s)     Reissue of lost or stolen key(s)  
 Transfer       Reissue of bent or broken key(s)

Date \_\_\_\_\_ Org/Fund \_\_\_\_\_


Key(s) issued to \_\_\_\_\_ Department \_\_\_\_\_

Employee ID \_\_\_\_\_ Number to call for pickup \_\_\_\_\_

**Interior Room Key(s)**

**Cabinet/Desk Key(s) - numbers can be found on the face of the key, or on the lock**

Building	Room	Match key # if known
<input type="checkbox"/> Department Master - unlocks all interior doors within department		


<p><b>Dean or department head approval</b></p> Print _____ Signature _____ Date _____

**Building Key (check one) - requires signature from the building manager**

- Exterior Key - unlocks exterior door  
 Building Master - unlocks all exterior and interior doors

**Building manager's approval**

Print \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Reason for key**

**Campus Master - requires approval from Facilities Maintenance and Operations**

Campus Master   
 Facilities approval   
  Approved   
  Not Approved

Print \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**Transferred or returned keys**

Transfer - Interior keys require dean or department head signature. **Building master** requires signature from building manager. CAMPUS MASTERS ARE TO BE RETURNED TO FACILITIES.  
 Return  
 To \_\_\_\_\_  
 From \_\_\_\_\_  
 Key #'s \_\_\_\_\_

**Building manager's approval**

Print \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**KEYS RECEIVED BY**

All keys issued are property of the University of Alaska Anchorage. When keys are no longer needed or employment is terminated, all keys must be returned ONLY to FCS. To recore door locks a service request must be submitted to FCS. Any keys issued as a result of a recore must submit a key request form.

Print \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Billed by _____ Door _____ X \$5.00 = _____ Cabinet _____ X \$3.00 = _____ Total = _____	Locksmith _____ Key# _____ Key # _____	<b>OFFICE USE ONLY</b>
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## **F&CS Key Request Procedure**

**\*Check one - New key, Transfer, Reissue of lost, Reissue of bent/broken**

### **Section I-**

- 1. Date of the request**
- 2. Key(s) issued to (person who the keys are for)**
- 3. Employee ID#**
- 4. Org/Fund #**
- 5. Department name**
- 6. Phone number for key pickup**

### **Section II-**

- 1. Interior Room Keys – building, room#, key # if you know it**
- 2. Cabinet/Desk Keys – key number on the lock on the desk or cabinet**
- 3. Dean/Department head approval. Request will be rejected if missing signature.**

### **Section III-**

- 1. Exterior building or Building master**
- 2. Reason for the key**
- 3. Dean/Department head approval**
- 4. Building manager approval. Request will be rejected if missing signature.**

### **Section IV-**

- 1. Campus Master**
- 2. Request for contractor keys – provide project manager, contractor name, duration of contract**
- 3. Facilities director approval.**

### **Section V-**

- 1. Transfer or return of keys**
- 2. Who are keys transferred to**
- 3. Who are the keys transferred from**
- 4. Supply the key #'s (front and back)**
- 5. Dean/Department head approval for interior key transfers**
- 6. Building manager approval for exterior key transfer**
- 7. CAMPUS MASTER KEYS ARE TO BE RETURNED DIRECTLY TO FACILITIES BY DEPARTMENT HEAD WHEN NO LONGER NEEDED OR UPON TERMINATION**

### **Section VI-**

- 1. Keys received by – who is assigned the keys**