

## **KEY REQUEST FORM**

(Please Print) LAST NAME:			FIRST NAME:		UH ID or last 4 digits of SSN:		CONTACT	CONTACT PHONE:	
DEPARTMENT/PROGRAM:		·	NAME/TITLE:			APPROVING AUTHO	RITY CONTACT	T PHONE:	
The Security Lock and Key Policy require written authorization for each key issued for facilities. To obtain key(s):  1) Determine which building, room and/or doors to which you need access.  2) Obtain written authorization from appropriate authority listed in Key Authorization Master List.  3) Submit this completed form to POM. If key is for an Upper Campus facility, POM will forward this approved form to UHH Auxiliary Services.  4) You will be contacted when key(s) are ready for pickup – your signature and photo ID are required.  5) After usage, return key(s) by date specified to respective office from which you picked up keys: HawCC POM or UHH Auxiliary Services.  An annual review will update costs. Currently replacement keys: \$10 each; rekeying locks: \$50 each; replacing door hardware, locks, and keys: \$400 each; replacing padlocks: \$25 each.									
Input "Return By" date if you only need the key for a known time; otherwise input "Indefinitely"			Approving Authority	ving Authority  Signature of Requestor  Date key is received  OFFICIAL USE OF			USE ONLY	,	
BLDG/ROOM/DOOR	RETURN BY DATE	APPROVIN	G AUTHORITY SIGNATURE	RECEIPT SIGNATURE	DATE SIGN	IED KEY#	KEY CODE	ISSUE DATE	RETURN DATE
Special Comments:									

You may save this form with a new name to your hard drive and email to your supervisor for his/her signature. Forward this form to Planning, Operations and Maintenance after the approving authority has signed. Call 934-2754 if you have any questions.