

Key Control Form

By signing this form, the recipient agrees to notify the Building Administration Office if the requested/issued key is lost or stolen. The recipient also agrees to reimburse The University of Alabama \$25 for each key that is not returned. In addition, the requesting recipient's department agrees to reimburse the Key Shop Division of the Department of Public Safety \$50 for each lock cylinder that must be re-cored plus the costs for any other replacement keys resulting from a lock change.

PART 1 ~ KEY REQUEST

(Please type or Print)

Date: _____ Requester Name: _____

E-mail address: _____

Social Security #: _____ and/or CWID#: _____

Building requesting keys for _____

AFTER HOURS BUILDING ENTRANCE ACCESS VIA ACTION CARD (please check if desired)

Requesting 1 key to Room # _____

Requesting 1 key to Room # _____

Requesting 1 key to Room # _____

Requesting 1 key to Room # _____

Status (check one):

Faculty Staff Faculty Emeritus

Graduate Student Expected Date of Key Return _____

Undergraduate Student Expected Date of Key Return _____

Post Doctoral Fellow Expected Date of Key Return _____

Visitor from _____ Expected Date of Key Return _____

External Contractor from _____ Expected Date of Key Return _____

Requester Signature: _____

Part 2 ~ Key Request Approval

REQUESTING DEPARTMENT: _____ Dept. Phone #: _____

Full Account # for applicable charges: _____

Supervisor Name: _____ Signature: _____

Department's Chair Name: _____ Signature: _____

If Requesting department differs from Issuing department the following is needed:

ISSUING DEPARTMENT (responsible for the room(s): _____

Department's Chair Name: _____ Signature: _____

***All information on this side of form MUST be completed BEFORE the request will be processed.
Once completed please bring to the Administration Office, Shelby 1032.***

Part 3 ~ Administration Key Control

KCF # _____

Request Received Date: _____ Administrator Initials: _____

Found in File:	Room #	Key #	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	<u>Date & Admin Initial</u>
_____	_____	_____	_____

Ordered from Key Shop:	Room #	Key #	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	<u>Date & Admin Initial</u>
_____	_____	_____	_____

Key's Now Ready for Pickup- Inform Department/Requester:

Date: _____ Time: _____ Spoke/Emailed: _____ Initial: _____

Key(s) Agreement:

“By signing bellow I recognize that the key(s) issued to me today are the property of The University of Alabama. I accept responsibility for its (their) use and security. I understand that the key(s) is (are) not to be duplicated nor transferred to any other individual. I will return the key(s) to Shelby Administration by the expected date of return, or upon termination or transfer within the University. I understand that failure to return the key(s) will result in a \$25 per-key charge (plus), collection of which may require involvement of the University’s Police Department and/or Judicial Affairs.”

EXPECTED RETURN DATE: _____

- Room # _____ Key # _____
- Room # _____ Key # _____
- Room # _____ Key # _____
- Room # _____ Key # _____
- Room # _____ Key # _____

Date of Issuance: _____ Recipient Signature: _____