

Last Name		First Name		Work Phone Number	
Company Name			Phone Number		
Address		City		State	Zip

(For additional persons needing keys, please use space on back of form)

KEYS REQUESTED OR WORK TO BE DONE

Work Requested	Exact Location	Door Numbers (Include Letters)	Number of Keys Requested
Duplicate Keys <input type="checkbox"/>			
Change Locks <input type="checkbox"/>			
<i>Describe work or reason for lock change</i>			

The work may be accomplished at additional cost to your organization (subject to your authorization). Please sign in the space below, and return to the Airport Operations Administrative Offices. Allow five working days for most requests. Keys will be available in the Airport Badging office. I agree to tightly control the key(s) issued to me by the Department of Airports. I understand that the key(s) issued to me must be returned to Airport Operations if for any reason they are no longer needed. I also understand that if the key(s) leading to secure areas are lost or stolen, Federal Aviation Regulations require that any lock(s) actuated by the key(s) must be changed immediately. In this event, _____ (company) agrees to take responsibility for the costs of labor and parts associated with the replacement of the lock(s). I agree to notify the Airport's Key shop at 531-4555 immediately of any lost, stolen or reissued keys.

Authorized Company Signature (Must be on file with the Access Control Office)

Last Name	First Name	Signature	Date
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APPROVAL SIGNATURES

Airport Security Coordinator			
Last Name	First Name	Signature	Date
Airport Project Engineer (Contractors Only)			
Last Name	First Name	Signature	Date
Airport Property Manager			
Last Name	First Name	Signature	Date
Airport Contracts Manager			
Last Name	First Name	Signature	Date

Deposit Information (Contractors Only)

Check No.	Amount	Date Key Returned	Refund Processed
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Key Shop Use Only

Tracked Key Type	Key Number	Tracked Key Type	Key Number
Keys Picked Up By:	Name	Signature	Date

