SALT LAKE CITY DEPARTMENT OF AIRPORTS KEY AND LOCK ORDER FORM



SECTION 1	١	Type or print legibly in blue or black ink or application will be rejected.								
COMPANY REQUESTING KEY(S) Company Name		Type or print leg	Sponsor Company							
Joseph Joseph			openior company							
SECTION 2										
KEYS REQUESTED OR WORK TO BE DONE (Check all that apply)										
☐ Additional Key(s) ☐ Change Locks ☐ Cipher Code (☐ Change ☐ Add/Remove)☐ Damaged Key Quantity										
☐ Key Reassignment ☐ Lost Key(s) ☐ New Hire ☐ Stolen Key(s) (Police Report Required) ☐ Key Audit										
☐ Padlocks (☐ CR - 5070 ☐ CI	R - 5070-258	☐ MPS - 6125 ☐	MPS – 6125LJ)							
Location/Door Numbers (If Available)										
Describe work or reasoning for request										
SECTION 3 AUTHORIZING AGENT CERTIFICATION										
The above work may be accomplished at additional cost to your organization (subject to your authorization). I agree to 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 Badging if for any reason										
they are no longer needed (Keys may not be transferred to another individual without first being returned). I also understand that if the										
key(s) leading to secure areas are lost or stolen, the Transportation Security Administration regulations require that any lock(s) actuated by										
the key(s) must be changed immediately. In this event, (company name) 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 Badging Office in the event a key										
is lost or stolen. Unaccounted keys will be billed to the company at a cost of \$10.00 per key. Keys that are not picked up within 30 business										
days will be returned to the key shop, and a new request will need to be submitted. (Please allow 5 business days for delivery of keys)										
AUTHORIZING AGENT NAME (Prin	t):									
	_									
AUTHORIZING AGENT SIGNATURE:		DO NOT SIGN UNTIL APPLICATION IS COMPLETED								
Phone Number: ()		Date:	Valid for 30 days after signed and	dated	ignatures Checked By					
SECTION 4										
SECTION 4 APPROVAL SIGNATURES										
Airport Security Coordinator or Designee										
Last Name First Name			Signature		Date					
Airport Properties/Contracts or Construction/Project Engineer										
Last Name First Name			Signature		Date					

My signature below indicates that I have received a key and understand the responsibilities of being a key holder. If my key is lost or stolen, I must report it to the Badging Office immediately. Additionally, I am responsible for paying a lost key fee (\$10.00 per key). If the key is found or returned, a partial refund will be given. My signature also indicates that I will not lend out my key, or give my key to another individual if my employment ceases.

KEY ASSIGNMENT									
Badge Number	Key Number	Name (Print)	Signature	Date	Issued By				

November 2024