

SALT LAKE CITY DEPARTMENT OF AIRPORTS

KEY AND LOCK ORDER FORM



SECTION 1		COMPANY REQUESTING KEY(S)		Type or print legibly in blue or black ink or application will be rejected.	
Company Name			Sponsor Company		
SECTION 2					
KEYS REQUESTED OR WORK TO BE DONE (Check all that apply)					
<input type="checkbox"/> Additional Key(s) <input type="checkbox"/> Change Locks <input type="checkbox"/> Cipher Code (<input type="checkbox"/> Change <input type="checkbox"/> Add/Remove) <input type="checkbox"/> Damaged Key <input type="checkbox"/> Key Reassignment <input type="checkbox"/> Lost Key(s) <input type="checkbox"/> New Hire <input type="checkbox"/> Stolen Key(s) (Police Report Required) <input type="checkbox"/> Key Audit <input type="checkbox"/> Padlocks (<input type="checkbox"/> CR - 5070 <input type="checkbox"/> CR - 5070-258 <input type="checkbox"/> MPS - 6125 <input type="checkbox"/> MPS - 6125LJ)					Quantity
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 (Print):					
AUTHORIZING AGENT SIGNATURE:			DO NOT SIGN UNTIL APPLICATION IS COMPLETED		
Phone Number: ()			Date: Valid for 30 days after signed and dated		Signatures Checked By
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				
Key Number	Name (Print)	Signature	Date	Issued By