

UNIVERSITY OF NORTH TEXAS™

KEY REQUEST FORM

UNT Facilities
Door Systems Office
 307 S. Avenue B, Suite 006

Phone: (940) 565-4888
 Fax: (940) 369-7158
 Fax: (940) 369-8973

Last Name:	First Name:	Mi.:
UNT ID #:	<input type="checkbox"/> Faculty <input type="checkbox"/> Staff <input type="checkbox"/> Student <input type="checkbox"/> Other	
Keyholder Phone:	Keyholder Email:	

Department							Door Systems Office	
	Building Name	Room Number	Dept. #	Acct#/ DeptID	Authorizer Signature	Date	Issue #	Keycode
1								
2								
3								
4								
5								
Authorizer Printed Name					Authorizer Email		Authorizer Phone	

Note: All of the Above Information is Required.

IMPORTANT NOTICE!

All keys are the property of the University and shall not be loaned, borrowed or transferred without Door Systems approval. Keys lost or stolen shall be reported to the Door Systems Office as soon as possible.

KEYHOLDER'S AGREEMENT

By my signature below, I agree to all the following terms:

1. The key described herein remains the property of the State of Texas and UNT Door Systems.
2. This key is entrusted to me for my exclusive use - I will not duplicate it, loan it, exchange it, or otherwise allow its use or possession by any other person.
3. I will report its loss, theft or destruction immediately to my department and to Door Systems.
4. If this key becomes lost, stolen or otherwise not available for return, I will pay the key replacement fee.
5. When I terminate employment or no longer need this key, or upon demand from Door Systems, I will return it promptly, in person, and ONLY to the UNT Door Systems Office. If I do not return this key, I agree to all the following terms:
 - a. I will pay the current key replacement fee;
 - b. I will, if required, pay the cost for rekeying all affected locks;
 - c. Processing of payment of my retirement refund and other entitlements may be delayed;
 - d. My grades may be blocked;
 - e. A disciplinary reprimand may be entered in my permanent personnel record;
 - f. The University may bring civil or criminal proceedings against me for theft of state property.

Note: The original form shall be sent to Door Systems and copies retained by the department and the keyholder.

Keyholder's Signature:	Date:
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