



Facilities/Maintenance Department

Contractor Key Access Form

Date: _____

School: _____

Building: _____

Room: _____

Type of Key: Master Room School set

Area: _____

Upon receipt of these keys, I assume the following responsibilities:

1. Loaning or duplication of keys is strictly prohibited. Keys shall remain in the possession of the assigned holder at all times.
2. Lost or stolen keys will be reported to the Administrator immediately. If lost I will be required to provide documentation (e.g. police report) to the Administrator.
3. In the event that a key is lost, the company name on this form will be responsible for the re-keying of any locks deemed necessary by the District to maintain the security of the site.
4. I will notify the project manager and security in writing at least 24 hours in advance of any after-hours access. Any charges for false alarm, including staff time will be paid by the contractor.
5. I will secure the building during my occupation and exit. Any vandalism, loss of theft or cleanup from not securing campus or unauthorized use of key will be the contractor's responsibility.
6. Final Payment on Purchase order will be withheld until key is returned.

Key Issued To: Company: _____

Phone: _____

Name: _____

Title: _____

Authorized Signature: _____

Date: _____

Administrators Signature: _____

Date: _____

Keys Returned

By: _____

Date: _____

Administrator: _____

Date: _____