



# Key Request

Key Shop  
Dickson Building 114  
2000 Campus Box  
Elon, NC 27244  
(336) 278-5500

Please complete one form per person and submit to the Physical Plant Key Shop after signatures are obtained.

Key(s) requested for:

BUILDING:	ROOM/OFFICE:

## REQUESTOR (KEYHOLDER) INFORMATION

NAME: \_\_\_\_\_ DATE OF REQUEST: \_\_\_\_\_

PHONE: \_\_\_\_\_ CAMPUS BOX: \_\_\_\_\_

UNIVERSITY ID: \_\_\_\_\_ FACULTY STAFF

DEPARTMENT: \_\_\_\_\_

## APPROVALS

DEPT. HEAD/CHAIR NAME: \_\_\_\_\_ DIR /DEAN NAME: \_\_\_\_\_

DEPT. HEAD/CHAIR SIGNATURE: \_\_\_\_\_ DIR /DEAN SIGNATURE: \_\_\_\_\_

AVP OF PHYSICAL PLANT SIGNATURE: \_\_\_\_\_

VP FOR BUSINESS, FINANCE & TECHNOLOGY SIGNATURE: \_\_\_\_\_  
*(for campus wide master keys issued to non-Physical Plant employees only)*

## KEYHOLDER'S AGREEMENT

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

- The key describe herein remains the property of Elon University.
- The key is entrusted to me - I will not duplicate, loan, exchange or otherwise allow its use or possession by anyone else.
- I will report its loss, theft or destruction immediately to Campus Safety & Police, my department and the Key Shop.
- If this key becomes lost, stolen or otherwise not available for return, I will pay the replacement fee.
- When the key is no longer required as identified above, or upon request from the Key Shop, I will return it promptly.

If I do not return this key, I agree to all the following terms:

- I will pay the current key replacement fee;
- I will, if required, pay the cost for re-keying all affected locks.

KEYHOLDER'S SIGNATURE: \_\_\_\_\_  
*(upon receipt of keys)*

DATE OF ISSUE: \_\_\_\_\_

Key Room Use Only
KEY CODE:
KEY USE:
DATE ENTERED: