## **Department of Geology Key Request Form**

Complete only the **top box** of this form. Complete one form for each key.

Return the signed form to the mailbox for Vickie Searight in the Main Office: Cooke 126. You will be notified by email when your key request is ready for pickup. Questions regarding keys may be submitted by email to <a href="mailto:glyadmin@buffalo.edu">glyadmin@buffalo.edu</a>

Requested by (print):				
Requested by (print):		Last Name	Last Name	
Email:	@buffalo.edu	Phone Number:		
Key Usage:	ace / cabinet / object the key opens.	(Ex: Room name, specific person's lab, s	specific office.)	
Building & Room no.:		Key #: 4 or 5-digit o	code (If known)	
	the keys agrees to the followin			
• Each person to over the key (e	o whom a key is issued is research. do not loan the key to oth	ponsible for always maintaining ers). Initial:	g control	
• Lost keys mus	t be reported immediately.	Initial:		
• <b>Keys that are not returned may incur re-keying fees.</b> As an example, in 2015 a lost teaching submaster key cost \$476. Initial:				
• Keys are to be separates from	returned when no longer ne n the university (program con	eeded or when the person to who	om issued al:	
Requester's Signature (Person checking out keys	:	anature		
,			Date	
Approver.	Printed Name	Signature	Date	
Comments/Notes:				
	FOR OFFICIAL	USF ONLY	$\equiv \equiv$	
Keys Di	spensed	Keys Returned		
Distributed:		Received:	Date	
Check when completed: Recorded in Database:		Check when completed: Updated in Database: Returned	to Inventory:	
	FOR COMPLETION WHI	EN RETURNING KEY		
Ι,		, certify that I have returned this	s key, and that	
I have accounted for a	all other keys that have been a	assigned to me, on(Da	te)	
Signature:		,	,	