

## UTC KEY REQUEST FORM

W/O# \_\_\_\_\_

Please allow 10 business days to process your request. You will be notified through your UTC email address when your key is ready. Keys must be picked up within 30 days of notification of completion or the key request will be voided and the keys recycled. Keys must be returned directly to Facilities Planning & Management

**\*\*\*Note: Keys will not be issued to non-regular employees (including graduate students) or card-swipe doors. Please refer to our departmental key policy for more information.\*\*\***

Name \_\_\_\_\_  
 (Last Name) (First Name) (Middle Initial)

UTC ID \_\_\_\_\_  
 (ABC123)

Department \_\_\_\_\_  
 (Mail Code) (Department Name)

Date Requested \_\_\_\_\_  
 (month/day/year)

Department Phone \_\_\_\_\_ Requester Phone \_\_\_\_\_

UTC Email Address \_\_\_\_\_  
 (firstname-lastname@utc.edu)

Reason:  New Employee  Replacement  Other (provide details below)

Dept. Acct. Number \_\_\_\_\_ Police Report Number \_\_\_\_\_  
 (Police Report and Department Account Number required for replacements only)

**\*\* There will be a \$5 charge for replacement keys\*\***

REQUESTED AREA				FACILITIES USE ONLY
<b>**List room numbers only. Please attach additional page(s) if more than 5 areas are being requested**</b>				
QTY	BUILDING NAME	ROOM #	DEPT HEAD INITIALS	LEAVE BLANK

<b>APPROVALS</b>
<b>DEPT HEAD (INITIAL EACH KEY)</b>
Dept Head Print
Dept Head Sign
<b>ADDITIONAL AUTHORIZATION IF REQ</b>
Dean or Vice Chancellor
<b>FACILITIES PLANNING AND MGT</b>
Facilities Sign
<b>RECEIVED BY</b>
Requester Sign
Received Date

*Note: Some requests may require additional approval. Facilities will initiate any additional approval or routing.*

SPECIAL CIRCUMSTANCES/REQUIREMENTS OR REMARKS:

Note: Only the individual requesting keys may pick them up. Requester must be present along with a valid UTC ID. Keys can be picked up at Facilities Planning & Management, Administrative Building, 400 Palmetto Street within 30 days of notification. Keys must be returned to Facilities Planning & Management when no longer needed, the lock is changed, duties have changed, or employment at the University is terminated.

FOR FACILITIES USE ONLY		
<input type="checkbox"/> Request Denied	Locksmith Initials: _____	Other: _____
<input type="checkbox"/> Key(s) Denied	_____	
<input type="checkbox"/> Request Changes	Date Received: _____	
<input type="checkbox"/> Request on Hold	_____	
<input type="checkbox"/> Request Complete	Date Emailed: _____	
Acknowledgement of Key Policy: _____		