REQUEST FOR LOCK CHANGE FORM

PLEASE REFER TO FACILITIES MANAGEMENT WEBSITE FOR INFORMATION REGARDING KEY POLICIES

Building:			
Department:			
Room #:			
Room formerly occupied by another department – Yes No			
Name of former department:			
Door to be keyed to the department master key Yes No			
Master Key #: or Sub-Master Key #:			
, <u> </u>			
Room is to be used as:	Please check	Room to be used as:	Please check
Classroom		Lounge	
Food Services		Office	
Laboratory		Storage	
Library Space	pace Student Space		
Individual Keys required for:			
Faculty Staff Student Department Key Cabinet			
Room #	# of Keys	s Required	Account #
Departmental Authorization:			
Departmental Contact Name:			
Extension #			
(Administrative Assistant Name or Representative responsible for key distribution)			

The lock change request form can be e-mailed to: Keys.And.Swipe@BrockU.ca or it can be sent through interoffice mail to Facilities Management.

Please allow 7-10 days for completion. Call Facilities Management, Nancy Piluso, x3581 to schedule a date and possible time. No key request will be processed without the proper authorization by the Department's Administration. Facilities Management will contact the Administrative Assistant when the key(s) are ready for distribution.

Keys are to be picked-up from Campus Security, Monday through Friday, from 8:30 a.m. to 4:30 p.m. Keys MUST be picked-up by the individual who is receiving the key(s). Brock University ID must be shown, and a Key Issue Authorization Agreement must be signed.