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|  | | | Key Requisition Form | | | | | | | | **Facility Request Problem ID #**  (Assigned by Facility Operations) | | | |
|  | | |  | | | | | | | |  | | | |
| Please complete the information requested below, print the form, and obtain the proper authorization. Once signed, please email the form to  **Facility Operations** at [facilityoperations@udmercy.edu](mailto:facilityoperations@udmercy.edu). Incomplete forms will be returned to the requestor without processing.    **Please Note:** If this request is for an **exterior door** of the building, please email the form directly to **Public Safety** at [publicsafety@udmercy.edu](mailto:publicsafety@udmercy.edu). | | | | | | | | | | | | | | |
| Requestor's Complete Name: | | | | | | Requestor's College or Department: | | | | | | Requestor's Office Phone: | | |
| Requestor's Building: | | | | | | Requestor's Room Number: | | | | | | Exterior Door?  Yes  No | | |
| College or Department to Charge: | | | | | | FOAPAL:       -    -7176-    -     - | | | | | | | | |
| Quantity | Name of Employee to Receive Key(s) | T# of Employee to Receive Key(s) | | Intended Area of Access | | | | | | Reason for Key Request  (If “Spare” or “Other” please explain in your initial email) | | | | |
|  |  |  | |  | | | | | | Broken New Lost Stolen Spare Other | | | | |
|  |  |  | |  | | | | | | Broken New Lost Stolen Spare Other | | | | |
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| Dean/Department Head/Director's Printed Name: | | | | | | | | | | | | | | |
| Dean/Department Head/Director's Authorizing Signature: | | | | | | | Date: | | | | | | | |
| **Section Below to be Completed by Public Safety/Facility Operations** | | | | | | | | | | | | | | |
| Public Safety Authorizing Signature (For exterior doors only) | | | | | | | Badge Number: | | | | | | Date: | |
| Key Pickup Signature: | | | | | Date: | | | | Keys Delivered By: | | | | | Date: |
|  | | | | | | | | Revised 4/14/21 | | | | | | |