

Lost Master Key Form

REKEY BUILDING Department is Charged DO NOT REKEY BUILDING Reissue Lost Key							
BUILDING OWNER							
Name		Title					
Phone		Email					
Bldg.		FOAPAI		Fund	Org	Account	Program
		COMPLE TO REK				714700	
LOST MASTER OR GRAND MASTER KEY							
Key #		Serial #				Keyway	
AUTHORIZED BY Department Head, Dean, Vice President							
Signature		Print Name				Date	
Signature Pi		Print Name	rint Name			Date	
FACILITIES MANAGEMENT							
		Print Na	me				
Signature						Date	

I understand that the Master Key or Grand Master Key listed has been lost and leaves the building under my administration at risk. If I choose to rekey the building, my department will be responsible for all associated costs. If I choose to not have the building rekeyed, I recognize the risk and take responsibility for any future security issues that may arise if the key is found and used by an unauthorized person.

Email Completed Form to KeyManagement@southalabama.edu

Revision date: 2/05/2019