

Facilities Management - Key Shop Request Form

	laster Key Request	Remove door from Buildin	g Master
		en justification before the request can l m. Removing a door from the Building	
Key requested for:			
Name		Title	
Department Name		Department #	
Bldg (Prefix)	Room #	Phone #	
		this master key in the space provided n-keyshop@usf.edu (not through Docu-	
DETAILS/JUSTIFICAT	ΓΙΟΝ:		
of the requestor from may be held financial	n my department or the univ ally responsible for rekeying	sible for ensuring the return of this key versity. Furthermore, if keys are lost or the affected areas (Policy 6-012 Secti- required for all master key requests.	not returned, the department
Key request approve	ed by:		
Signature*		Date	
Print Name		Phone #	
Title		Department	
* Approving authorit	y should not be the same as	s receiving the key.	
To be completed by	Facilities Management		
APPROVED/DISAPF	PROVED FM [Director or Authorized Designee	 Date

Revision Date: 7/24/2023

Revision Date: 7/24/2023