



**Key Control Service**  
 Mail Code 6714  
 208 Physical Plant Drive  
 Southern Illinois University Carbondale  
 Carbondale, IL 62901

Voice: 618.453.5109  
 Fax: 618.453.7854  
[keycontrol@pso.siu.edu](mailto:keycontrol@pso.siu.edu)  
<http://www.pso.siu.edu/keycontrol/>

**ALL INFORMATION IS REQUIRED PRIOR TO PROCESSING**

**(for Key Control use only)**

Budget Purpose#	
Account Title:	
<b>Department Name:</b>	<b>MC:</b>
Key Contact Name:	
<b>Key Contact Signature:</b>	Date:
Email:	Phone: Fax:
<b>Fiscal Officer's Signature:</b>	Date:
<b>VCAF Signature:</b> (when applicable)	Date:

GIR#		
Electronic Access		
Core(s)		
Key(s)		
Schlage		
Re-Pin(s)		
Padlock(s)		
Part(s)		
Labor (hourly)		
<b>TOTAL</b>		

**Work/Key Request**

Description of work or keys for following location(s).

**N** = New Key      **T** = Transfer – please provide complete key information      **L** = Lost  
**R** = Replacement key (must return original key)      **EA** = Electronic Access      **S** = Stolen

Code	Qty.	Code on Key (if known)	Serial #	Keyholder's AIS#	Keyholder's Name	Keyholder's Signature

**NOTE: For faster service, please fax or e-mail (keycontrol@pso.siu.edu) completed signed form to Key Control and retain original.**

For Key Control Use Only

**WORK REQUEST NUMBER**

I agree that my possession of key(s) or electronic access credentials that are listed is a temporary loan of University property granted by The Chief Administrative Officer of the University, and that I am obligated to all written policies and procedures on key/electronic access control.

DEPARTMENTAL KEY CONTACT:

PHONE

**KEY REQUEST**

**N** = New Key

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**T** = Transfer – please provide complete key information

**EA** = Electronic Access

**L** = Lost

**S** = Stolen

<b>Code</b>	<b>Qty.</b>	<b>Code on Key</b>	<b>Serial #</b>	<b>Keyholder's AIS#</b>	<b>Keyholder's Name</b>	<b>Keyholder's Signature</b>

I agree that my possession of key(s) or electronic access credentials listed is a temporary loan of University property granted by The Chief Administrative Officer of the University, and that I am obligated to all written policies and procedures on key/electronic access control.

FOR OFFICE USE ONLY  
WORK REQUEST NUMBER

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