Sample:

SIGNATURE AUTHORIZATION
FOR KEY and/or LOCK REQUESTS
(Submit Original to Customer Relations, M/C 0908)

Effective Date: ______________

DEPARTMENT NAME: __________________________ BLDG: __________
MAIL CODE: __________________ PHONE: __________ RM #: __________

Authorized Signature: __________________________
Name (print or type): __________________________

Authorized Signature: __________________________
Name (print or type): __________________________

Authorized Signature: __________________________
Name (print or type): __________________________

Authorized Signature: __________________________
Name (print or type): __________________________

Authorized Signature: __________________________
Name (print or type): __________________________

REQURED

DEPARTMENT HEAD SIGNATURE __________________________
Name (print or type): __________________________

Comments: __________________________