

KEY RECEIPT FORM

Date: _____

Key(s) Issued to: _____

Room Number: _____

Key Type: _____

Key Number: _____

Upon Receipt of the key, I assume the following responsibilities:

1. Loaning or duplication of key is strictly prohibited. Failure to comply may result in disciplinary action and or/termination. Key shall always remain in the possession of the assigned holder. Any person found to be giving possession of their assigned key to someone else could result in disciplinary action up to and/or including termination
2. Lost or stolen keys will be reported to the Building Manager as soon as possible.
3. In the event the key is lost, the responsible person will be held accountable and liable for the reimbursement cost of R150.00

Signature of person receiving key_____
Date_____
Facilities Manager_____
Date

KEY RETURNED

Date key returned: _____

Key return by: _____

Reason for return: _____

Administrator receiving the key: _____