(PLEASE PRINT)

PROJECT# AND NAME: ________________________
STRING ACCOUNT #: __________________________

FEES

- $36.00 Flat Labor Rate +
- $15.00 for each Building/Door Key
- $  5.00 for each Furniture/Misc. Key

PHONE #: ________________________
PROJECT MANAGER: ________________________
PROJECT START DATE: ________________________
EXPECTED COMPLETION DATE: ________________________
CONTRACTOR NAME: ________________________
CONTRACTOR AUTHORIZED REPRESENTATIVE: ________________________

REMEMBER – KEYS ARE A SECURITY ITEM

Building Name

List of Rooms

Number of Keys

Elevator Keys Etc.

Electronic Access

Card Key #1: ________________________

Card Key #2: ________________________

Provide starting and ending date

Start Date: __________ End Date: __________
Start Date: __________ End Date: __________

PROJECT MANAGERS WILL NEED TO MAKE ARRANGEMENTS THROUGH CAMPUS ID TO OBTAIN ID/PROXY CARD FOR CONTRACTOR PRIOR TO GRANTING OF ACCESS

It takes three days to process a key request and make the key(s). When they are ready, the key holder will be contacted at the number provided. A photo ID must be presented at the time the keys are issued.

- Keys will be issued to Contractors Authorized Representative.
- Keys are the responsibility of the Contractor and must be returned at the end of the project.
- Lost or unreturned keys may result in the need to re-key the door/area. Per Boise State University policy, contractor’s retainage will be withheld if all keys are not returned at project completion. If keys have not been returned within 30 days of completion, retainage will be used to re-key all doors as necessary to restore security.

AUTHORIZING SIGNATURE(S):

__________________________ Date: __________
Contractor’s Authorized Representative

__________________________ Date: __________
Senior Project Manager or Associate Director or Director

__________________________ Date: __________
Auxiliary Facility Director (if access to Aux facility needed)

RETURN COMPLETED/ORIGINAL SIGNED FORM TO FOM/ MS 1270