

REQUEST FOR KEY REPLACEMENT

NORTH DAKOTA STATE UNIVERSITY – DEPARTMENT OF RESIDENCE LIFE

Name: _____ Student ID#: _____ NDSU Email: _____
Please print

Building: _____ Room/Apt.#: _____ Cell Phone#: _____ Date: _____

I request the following key(s) be replaced, knowing I will be charged for replacement costs:

- _____ Room/Apartment Key
- _____ Mailbox Key (*Specify A, B, C, or D if applicable*)

NOTICE: By submitting this form, you will order the replacement of your room/apartment or mailbox key. Locks are changed as soon as possible to ensure resident's safety and security.

- **I understand that Residence Life will be billed by Facilities Management for the key replacement work I am requesting. That cost will be passed through to my student account, with no additional charges or processing fees attached. Billing will occur regardless of whether or not I find my key(s) prior to the actual key replacement or cylinder change.**
- No refund is available after the Request for Key Replacement form has been signed.
- Should you find your keys after this request has been made and signed, please turn them into your Hall Director/Complex Manager.

Resident Signature

Date

Residence Life Staff Signature

Date

FOR OFFICE USE ONLY:

Date Called In: _____

Residence Life Staff Signature

Completed Date

Note: After a lock is changed or new keys are cut, please forward old key(s) AND request form to the Associate Director of Residence Life Administration.

Fees Assessed: \$ _____ Job#: _____ Date: _____ Central Staff Initials: _____