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How to: Fill out the Contractor Key Request Form

- Primary Building Coordinator must fill in the top portion of the form for our records
- This information is required so we can cross-reference the validity of the individual

CONTRACTOR **CONTRACTOR KEY REQUEST FORM** **KEY REQUEST**
 North Carolina Department of Administration
 Division of Facility Management-Security Systems 984-236-0460

1. AGENCY INFORMATION:

BUILDING COORDINATOR:		REQUEST DATE	
DEPARTMENT – DIVISION:		BUILDING NAME	
MSC# and Zip Only:		TELEPHONE #	
REQUESTOR		BUILDING NAME	
COMPANY		ADDRESS	

2. DEPOSIT REIMBURSEMENT INFORMATION:

REIMBURSEE NAME		TITLE	
KEY DEPOSIT ADDRESS:		TELEPHONE #	
STREET		EMAIL:	
CITY & STATE			
ZIP CODE			

3. KEYS FOR TEMPORARY ACCESS TO STATE PREMISES FOR AUTHORIZED CONTRACTORS WILL SUBJECT SAID CONTRACTORS TO FOLLOW AND ACCEPT THESE GUIDELINES BEFORE KEYS CAN BE DISTRIBUTED

- a) FMD Security Systems is the only authorized agency to duplicate keys for State Government Facilities
- b) The Building Coordinator shall process the electronic form by utilizing the AIM\ReADY Web Portal
- c) Only (1) individual shall be listed as the keyholder per form
- d) A \$100.00 deposit is required for EACH Key
- e) Only checks are approved means of payment (Cash or Credit Cards are not accepted means of payment)
- f) Payments are to be made for each person keys are assigned to (1 check per keyholder i.e. user)
- g) All checks will be deposited within 7 days of receipt in following with Fiscal management guidelines
- h) The Key holder must pickup and sign for the key from the Security Systems Office
- i) In the event of the termination of the person to use key, the key shall be returned to Security Systems
- j) A Key Transfer may be obtained once a new ReaDY submission has been processed for the key
- k) When keys are returned to Security Systems the reimbursement forms will be processed within 7 days, then the DOA Fiscal Management Division will return deposits to the address listed in the reimbursement section 2
- l) Forfeiture of the deposit will occur when the contractor loses or does not return the key(s) to Security Systems within (1) year or renews the key contract in the ReaDY App within 1 year of receipt of contractor key

KEY CODE	ROOM NUMBER	KEY HOLDER NAME	DL LAST 4 OR NC STATE ID #	SECURITY SYSTEMS USE ONLY

I hereby understand and agree to abide by these terms and conditions

<u>KEY PICK UP DATE:</u>		<u>SIGNATURE RECEIVED:</u>	
<u>KEY RETURN DATE:</u>		<u>SIGNATURE RETURNED:</u>	

*****THIS SECTION IS FOR SECURITY SYSTEMS USE ONLY*****

WORK ORDER NUMBER		KEYSTONE ENTRY DATE	
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How to: Fill out the Contractor Key Request Form

- General rules and guidelines for Contractors and Sub-Contractors

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How to: Fill out the Contractor Key Request Form

- Fill all applicable form blocks for key request.
- The ReaDY application will not be processed unless these blocks are filled out correctly.

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COMPANY		ADDRESS	

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REIMBURSEE NAME		TITLE	
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- f) Payments are to be made for each person keys are assigned to (1 check per keyholder i.e. user)
- g) All checks will be deposited within 7 days of receipt in following with Fiscal management guidelines
- h) The Key holder must pick up and sign for the key from the Security Systems Office
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How to: Fill out the Contractor Key Request Form

Key holder will print, sign and date when they pick-up and return key(s).

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M/C# and Zip Only:	TELEPHONE #
REQUESTOR	BUILDING NAME
COMPANY	ADDRESS

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How to: Fill out the Contractor Key Request Form

- It is the Building Coordinators responsibility to input the Contractor reimbursement information.
- The DOA Fiscal Dept. will then *forward the deposit* to the address provided by the Building Coordinator once key(s) have been returned to Security Systems.

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Addendum:

- Accepted forms of deposit are:
 - Personal Check
 - Company Check
 - Cashier's Check
- The form and photo copied information, i.e. Personal Checks, Company Checks, Cashier's Checks, Driver's license, or State ID's, etc. will be kept on file until the keys are returned for deposit.
- Once keys have been returned Security Systems will send the reimbursement form to the DOA Fiscal department for processing.
 - **The reimbursement check will be sent to the address supplied by the Building Coordinator. (Form Section 2.) Fig. 5**
- After the reimbursement process is complete Security Systems will retain all records for (7) years per State requirements.

Any questions or inquiries can be forwarded to:

- Security Systems Office
120 West Lane Street
Raleigh, NC 27603
984-236-0460
Security.systems@doa.nc.gov