

## **Key Transfer Form**

## Department of Access Control & Security Systems Plant Services, Room 243

Phone: (216) 687-5386 E-mail: access.security@csuohio.edu

Complete this form and submit it to Access Control & Security Systems. Ensure the accuracy of all data; failure to do so will delay the transfer process. **Key Transfer Forms must have all three required signatures or AC&SS will not process the request**. The completed form can be submitted to AC&SS via e-mail or interoffice mail.

	Transfer From	First			Last	N	∕Iiddle	
	11130			Eddt			Phone	
	CSU ID		E-mail			Pho		
	Transfer To:First							
			Last			М	Middle	
	CSU ID		E-mail			Phone		
		Department		Facul	ty Staff	Student	Temp	
	Key Mark	Serial Number			Note: Son	ne keys		
X	18KC3	010322 or 2	0		have a six serial num	-digit	(	
			18KC3		below the		18K	
			010322		keymark (	left).	101	
			710		Others hav		7	
					CAMAI NIIM	per in		
					the top-rig	ht		
						ht		
		Transferor Signature			the top-rig	ht ht).		
					the top-rig corner (rig Date	ht ht).		
		Transferor Signature  Recipient Signature			the top-rig corner (rig	ht ht).		